PRESCRIBED CURRICULUM OF NURSING ASSISTANT TRAINING PROGRAMS

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INTRODUCTION

In 1987, the Maine State Legislature authorized the Maine State Board of Nursing to prescribe a curriculum for the training of nursing assistants. In December 1988, the Board voted unanimous approval of this curriculum. In 1998 a review and update of the curriculum was conducted by an advisory committee. In June 1999, the Board reviewed the proposed revision to the curriculum and on October 7, 1999 the Board voted to accept the curriculum. In January 2003, the curriculum was reordered. -Units I-VI coincide with the PatientPersonal Support Specialist (PSS) curriculum part I. The Maine.

or from the Maine State Board of Nursing. The Introduction to Health Care and Human Services for the Patient Support Specialist (PSS) and Certified Nurses Assistant (CNA) Training Program (Units I-VI is available through the Department of Education, Maine State Board of Nursing, and the Department of Health and Human Services. The curriculum is generic in nature and is designed to prepare the student to provide basic nursing assistance under the supervision and delegation of a registered professional nurse. Basic skills learned will enable the certified nursing assistant to do the following:

- 1. Maintain a proper physical and emotional patient environment
- 2. Report and record observations
- 3. Provide assistance in personal hygiene
- 4. Assist with body movement and ambulation
- 5. Assist with nutrition and elimination
- 6. Assist with emergency situations
- 7. Communicate in an effective, positive manner
- 8. Assist the registered professional nurse to provide general patient care.

The registered professional nurse (RN) may delegate to a nursing assistant-<u>/</u>student only those tasks for which the individual has been satisfactorily prepared to accept, as documented by the instructional staff.

It is the responsibility of the professional instructor to remain current on federal and state laws and rules and regulations, applicable to training and certifying nursing assistants. Refer to the OBRA regulations Federal Register 42 CFR parts 431, 433and 483 Medicare and Medicaid Programs: Nurse Aide Training and Competency Evaluation Programs and Chapter 5 Rules and Regulations of the Maine State Board of Nursing

It is hoped that this standardized approach to programming will improve the quality of educational programs preparing nursing assistants and ultimately be reflected in improved quality of patient care.

Upon successful completion of this program and an evaluation of competency through testing, the nursing assistant will be issued a standardized certificate of training by the educational program, which will keep a record of all certificates issued <u>for at least 3 years</u>.

The curriculum will be made available upon request to all approved agencies and facilities offering educational programs to prepare certified nursing assistants. Additionally, loan resources, including audiovisual aids, will be made available (at a minimal cost) through the Curriculum Resources Center at United Technologies Center in Bangor.

This curriculum and the loan resources are only teaching aids. The quality of educational programming ultimately rests with the professional nurse instructor, who is legally responsible for the administration and supervision of the program.

The Maine State Board of Nursing is grateful to all those who gave unselfishly of their time and effort in developing, editing, and designing this manual. The Board extends a special thank you to Mary A. Brennan, R.N., M.S., Ed.,those who served as chair of on the advisory committees established by the Board to develop and revise and update this curriculum.

{Members of the Advisory Committee have been updated}

<u>CNAThe Prescribed</u> Curriculum <u>for Nursing Assistant Training Programs</u> Advisory Committee

June 1999 **March 2008** Diane Dalton, R.N.C., Chair Anne Ambler-Cote, R.N.,-DNS Mid Coast Senior Center **Greenwood Center** Brunswick, Maine Sanford, Maine Roanne S. Seeley, R.N. Consultant Marian Rector, R.N. Instructor Mid Coast School of Technology____ Maine Department of Education (until March 31, 2007) currently Rockland, Maine employed by Acadia Health Education Coalition Bangor, Maine Lisa Harvey-McPherson, R.N. Gail Defiore, R.N., Instructor —EMMC-Rosscare Maine Medical Center Home Health Care Portland Adult Education Virginia deLorimier, R.N. Carol Cole R.N. Assistant Executive Director Denise Osgood, R.N. Division of Licensing and Certification Maine State Board of Nursing C N A Registry

HOW TO USE THIS MANUAL

This manual includes program objectives, unit objectives, and a content outline. All theory must be taught even when correlated clinical experiences are not available. Policies pertaining to attendance, grading, progression, and retention shall be developed by the instructor and made available in writing to the students upon admission. A copy of the Maine Health Occupations Educators Association (MHOEA) policy may be obtained from the Department of Education Copy of the MHOEA policy is included in this document as a resource beginning on page 106.

The **minimum** hours for this curriculum shall be:

Theory 8090 hours
Skills laboratory 20 hours
Clinical 5070 hours
Total 150180 hours

The instructor responsible for the delivery of the program shall be a currently licensed registered professional nurse in the State of Maine with demonstrated competence in teaching techniques. - Contact the Department of Education for information on the Train the Trainer Programs for CNA instructors. Members of other disciplines may assist in teaching the CNA program as necessary and desirable. Tools for evaluating student performance in the skills laboratory and in the clinical setting shall be developed by the instructor. There are five texts that are recommended for use with this curriculum. The test must up to date and no less than 5 years old. You may request one text from each of the textbook companies. When you have made a decision on the appropriate one, order the instructor's guide that will provide you with lesson plans, activities, exams, etc. Many of the guides are on CD and are easy to use. Often they will include powerpoint presentations that will make the didactic more meaningful to the student. The texts that are recommended are:

Essentials for Nursing Assistants, Pamela J. Carter, RN, Med, Lippincott, Williams, and Wilkins

Nursing Assistant: A Nursing Process Approach, Barbara Hegner, Barbara Acello, Esther Caldwell, Cengge Learning/Delmar

Being A Nursing Assistant, Francie Wolgin, Brady/Prentice Hall

Being A Nursing Assistant, Sheila A. Sorrentino, Elservier Mosby/Saunders

The Effective Nursing Assistant, Ruth Ann Stratton, Roanne Mancari, Glenco/Mcgraw Hill

The clinical instructor/student ratio shall be no greater than one instructor for every ten students. However the ideal clinical instructor/student ratio is one to one, and this ratio may be at times necessary for adequate learning and safe patient care.

All objectives must be met to successfully complete this course. All skills must be demonstrated, and the student must perform return demonstrations satisfactorily, either in the clinical setting or the skills laboratory.

It is recommended that a system of pass/fail be used in grading the skills laboratory portion of the course. The criteria necessary to pass each skill should be determined by the instructor and be available to the student prior to the skill test. Students are tested through direct observation by the instructor, who determines how many attempts the student should have for each test.

Some students may need a one-to-one practice session. Makeup time for any missed classroom, skills laboratory, and clinical hours must be provided according to school policy.

This curriculum sets minimum standards. Units I through VII must be taught at the beginning of the program utilizing the accompanying PSS-Introduction to Health Care and Human Resources manual (for Units I through VI). All information in the PSS manual must be presented. __ Because the first 6 units of the curriculum are common to the PSS and C N A curricula, it is imperative that the 6 units are taught the way they are presented so that a student may choose to continue on the PSS or the CNA track.

Content in Units VIII through XI need not be taught in the order listed. Time <u>may should</u> be added and emphasis made by instructor to highlight <u>certain aspects</u> of this portion of the curriculum. Nothing may be taught beyond the guidelines set forth in Chapter 5: Regulations Relating to Training Programs and Delegation by Registered Professional Nurses of Selected Nursing Tasks to Certified Nursing Assistants.

PHILOSOPHY

Nursing care is concerned with the basic needs of individuals, all of whom have physical, mental, spiritual, social, and cultural dimensions. The eertified nursing assistant (CNA) with appropriate education and training, is capable of providing nursing care under the supervision and delegation of a registered professional nurse.

Learning involves the whole person, including his or her intellect, feelings, values, attitudes, and interests. Learning progresses from simple to complex and takes <u>ininto</u> consideration the past experiences that serve as a basis for new knowledge and understanding.

The instructor helps the student to fulfill the program's objectives by creating a climate in which shared knowledge and the exposure of the learner to planned experiences will effect a change in the behavior of the student.

All efforts should be made to preserve the <u>safety</u>, dignity, individuality, privacy, and confidentiality of the patient.

The certified nursing assistant is a valuable member of the nursing team. The certified nursing assistant's role is to assist the registered professional nurse in tasks that support nursing practice.

COURSE OBJECTIVES

By the time the student completes this Upon course completion the student will be able to:

- 1. Maintain a proper physical and emotional patient environment.
- 2. Report and record observations.
- 3. Provide assistance in personal hygiene.
- 4. Assist with body movement and ambulation.
- 5. Assist with nutrition and elimination.
- 6. Assist with emergency situations.
- 7. Assist the registered professional nurse (RN) to provide in providing general patient care.
- 8. Communicate in an effective and positive manner.
- 9. Demonstrate understanding of skills appropriate for the CNA.

Unit I

Entering the Health Care and Human Service Fields

- 1. Describe the different kinds of health care and human service programs available to consumers.
- 2. Describe the important values in health care and human services.
- 3. Describe the scope of career options within the health care and human service systems (e.g., the types of employment available).

Unit I

Entering the Health Care and Human Service Fields

Content

home and community

waivers

Objectives

1. Describe the different kinds of health care 1. Health care and human services in and human service programs available to Maine A. Short-term care consumers. 1. acute care (hospitals) a. definition 2. Same day surgery centers B. Long-term care 1. Nursing facilities (NFs) a. definition b. services i. 24-hour care ii. consumer care iii. personal care 2. Assisted housing programs a. definition b. services i. residential care facilities ii. assisted living programs iii independent housing with services 3. Assisted housing services a. personal supervision b. protection from environmental hazards c. assistance with activities of daily living (ADLS) and instrumental activities of daily living (IADLS) i. ADLS definition ii. IADLS definition d. administration of medication e. diversional, motivational, or recreational activities f. dietary services g. nursing services 4. Home and community based services a. MaineCare Benefits

	. Describe the different kinds of health care and human service programs available to consumers. (continued)	b. in-home and community support services i. description ii. adult day services (ADS) iii. home health care services iv. hospice care v. personal support specialist (PSS) vi. homemaker services vii. respite care services vii. respite care services 2. Regulating health care and human services A. The Maine Department of Health and Human Services (DHHS) 1. Office of Maine Care Services 2. Office of Elder Services a. Adult Protective Services (APS) b. home and community based care services i. home delivered meals ii. outreach information and assistance iii. transportation iv. employment v. volunteer services vi. public education vii. legal services c. investigations of violations d. regulates/licenses i. assisted living ii. residential care programs iii. adult day care programs
		B. Behavioral Health 1. Adult Mental Health 2. Mental Retardation (MR) Adults with Cognitive and
		Physical Disability Services
		C. Office of Substance Abuse
		3. Paying for Health Care and
		Human Children's
		Behavioral Health
		Services
_		A. Medicare
Ì		1 Dort A

			Office of Substance Abuse
		3.	Paying for health care and human
			services
1.	Describe the different kinds of health care—and human service programs available to		2. Part B A. Medicare B. MaineCare (Medicaid)
	and numan service programs available to		1. Part A
	consumers. (continued)		2. Part B
	consumers. (continued)		B. MaineCare (Medicaid)
			C. Veteran's Affairs (VA)
			D. Private long term care
			E. State funded programs
			F. Private pay
2.	Describe the important values in health care	1.	Important values in health care and
	and Human Services.		<u>human services</u>
			A. Choices (staff and consumer)
			B. Person-centered
			C. Consumer involvement in planning
			D. Independence
			E. Participation in the community
			F. Being positive
			G. Individuality
3.	Describe the scope of career options within		Homemaker
	the health care and human service		Personal Support Specialist (PSS)
	systems (e.g., the types of employment available).	3.	Certified Residential Medication Aide (CRMA)
		4.	Mental Health Rehabilitation Technician (MHRT)
		5	Certified Nursing Assistant (CNA)
		6.	-Certified Nurses Assistant - Medication -(CNA-M)
		7.	Home Health Aide (HHA)
		8.	Other staff in nursing and assisted living
			facilities
			A. Dietary
			B. Activities department staff
			C. Nursing
			1. director of nursing (DON)
			2. charge nurse
			3. RNregistered nurse
			4. licensed practical nurse (LPN)
			5. certified nursing assistant (CNA
			5. certified nursing assistant (CNA
			5. certified nursing assistant (CNA6. certified nursing assistant

3. Describe the scope of career options within	E. Social <u>services</u>
the health care and human service	F. Housekeeping and laundry
—— <u>systems (e.g., the types of employment</u>	G. Clinical staff
——— <u>available) (continued).</u>	H. Maintenance
	

Unit II

Basic Work Skills and Job Maintenance

- 1. Describe your responsibilities as an employee.
- 2. Describe your rights as an employee.
- 3. Identify good work habits such as attendance, punctuality, and reliability.
- 4. Explain why prioritizing is important.
- 5. Prioritize a list of common tasks.
- 6. Describe conduct that is appropriate in a work setting.
- 7. Describe the importance of proper boundaries when working in health care or human services.
- 8. Explain the importance of personal appearance, hygiene, nutrition, and personal stress reduction for effective job performance.
- 9. Explain the importance of personal and career development.

Unit II

Basic Work Skills and Job Maintenance

	Objectives		Content
1.	Describe your responsibilities as an employee.	1.	 Your responsibilities A. Mandatory reporting of abuse neglect, or exploitation B. Maintaining confidential information C. Completion of proper orders D. Respecting consumer rights
2.	Describe your rights as an employee.	1.	Rights A. Definition B. Employee rights C. Laws 1. Occupational Safety and Health Association (OSHA) 2. wage and hour 3. hazardous chemical 4. fair labor standards 5. workers compensation
3.	Identify good work habits such as attendance, punctuality, and reliability.	 2. 3. 4. 5. 6. 7. 	Punctuality Dependability Reliability Appropriate dress Appropriate behavior Proper hygiene and appearance Positive attitude Integrity
4.	Explain why prioritizing is important.	1.	Prioritizing A. Time Management
5.	Prioritize a list of common tasks.	1.	Prioritizing Examples of prioritizing
6.	Describe conduct that is appropriate in a work setting.	1.	Teamwork
7.	Describe the importance of proper boundaries when working in health care or human services.	1.	Boundaries A. Definition B. Limits

C. Social and work relationships

Content
D. Community and home based care care plan job description the consumer's individualized
3. legal ethical codes E. Work activities
 Stress A. Definition B. Effects of excessive stress 1. physical effects 2. behavioral effects
2. Burnout A. Definition B. Signs 1. emotional cues 2. biological cues 3. other cues
 Managing stress and avoiding burnout. A. Emotional and physical well bein 1. exercise three to four times perweek. 2. eat well balanced, nutritious meals. 3. avoid caffeine, nicotine, and other stimulants. 4. get plenty of sleep. B. Leave your work at work. C. Do not take on all of the problems of your consumers.
,,

9. Explain the importance of personal and career development.

1. Personal and <u>career</u>

development/education

your own life

A. Professional education

supports on and off the job

E. Take care of things important in

- B. Training
- C. Educational goals

Unit III

Legal and Ethical Aspects of Care

- 1. Describe key regulations governing the functioning of health care and human service providers.
- 2. Explain basic consumer rights.
- 3. Describe the legal status of consumers including guardianship, power-of attorney, living wills, and "Do Not Resuscitate" (DNR) orders.
- 4. Recognize signs and symptoms of abuse (verbal, physical, psychological, and sexual), as well as, exploitation and neglect.
- 5. Explain your responsibilities in reporting known or suspected abuse, neglect, or exploitation—, including the consequences for not reporting.
- 6. Explain what ethics means and how it applies in the health care and human service fields.

Unit III

Legal and Ethical Aspects of Care

Objectives

1. Describe key regulations governing the functioning of health care and human service providers.

2. Explain basic consumer rights.

Content

- 1. Regulations
 - A. Definition
 - B. Example of regulations
 - administration and storage of medications
 - 2. procedures for psychosocial medical services
 - 3. assessment and service planning
 - 4. admissions policies and procedures
 - 5. implementation of activity programs
 - 6. hygiene and safety compliance
 - 7. handicap access and related American with Disabilities Act (ADA) issues
 - 8. minimum staff qualifications
 - 9. consumer records and tracking of services
 - 10. number of persons that can be served in particular facilities
- 1. Consumer Rights
 - A. Explanation of rights
 - B. Examples of documents on patient rights
 - 1. a consumer's bill of rights
 - 2. the resident's bill of rights
 - 3. <u>consumer's</u> bill of rights for home based care
 - 4. rights of residents in assisted living programs and residential care facilities
 - 5. rights and basic protections for persons with mental retardation and autism <u>health services</u>
 - 6. rights of recipients of mental health services

Objectives

3. Describe the legal status of consumers including guardianship, power-of-attorney, living wills, and "Do Not Resuscitate" (DNR) orders.

4. Recognize signs and symptoms of abuse (verbal, physical, psychological, and sexual), as well as, exploitation and neglect.

-Content

- 1. Guardianship and conservatorship
 - A. Purpose
 - B. Definitions
 - 1. incapacity
 - 2. guardian
 - a.— ward
 - 3. conservator
 - C. Relationship between a conservator and guardian
 - D. Who may serve as guardian or conservator
 - E. How is a guardian appointed
 - F. Managing money and property as a fiduciary
 - G. Types of guardianship
 - 1. full guardianship
 - 2. limited guardianship
 - H. Rights and responsibilities of the guardian
 - I. Working with guardians
- 2. Representative payee
- 3. Health care advance directives
 - A. Durable power of attorney for health care
 - B. Living wills
 - C. DNR orders
- 1. Adult Consumers
 - A. Definition of abuse
 - 1. physical abuse
 - a. pushing, hitting, shaking, pulling hair
 - b. tying to a bed, chair, or locking in a room
 - c. forcing into sexual activity
 - d. giving the wrong medicine or too much medicine on purpose
 - e. denying visits with friends or family
 - f. harassment or verbal threats
 - 2. indicators of abuse

Objectives	Content
	a.broken bones b.burns c. cuts d. internal injuries e. marks/bruises f. scars 3. sexual abuse a. definition of sexual abuse b. indicators of sexual abuse i. affectionate gestures that are lingering and seductive centered on the sex organs, anus, or breasts ii. injury to genitals, anus, breast, or mouth iii. sexual intercourse, fellatio, or cunnilingus performed on an incapacitated consumer iv. child reports a parent manipulates genitals, and/or buttocks v. staff member exposes his/her genitals to a consumer vi. venereal disease
	vii. torn, stained, or bloody underwear viiidifficulty walking or sitting ix. pain or itching in genital
	area 4. Neglect a. definition of neglect b. indicators of neglect i. assaultive consumers left alone and unsupervised ii. aide has fallen
	——asleep/_intoxicated while ——on duty iii. bleeding gums and some loose teeth

Objectives Content

—4. Recognize signs and symptoms of abuse		iv. consumer fearful about
—(verbal, physical, psychological, and		leaving room or home
sexual), as well as, exploitation and neglect.		v. staff not attempting to
— (continued)		determine the cause of
		<u>fear</u>
		vi. consumer fell several
		days ago and consumer's
		doctor or family was not
1	_	notified
	5.	Exploitation
		a. definition of exploitation
		b. indicators of exploitation
		i. representative payee fails
		to pay and provide money
		for personal needs
		ii. representative payee
		purchases furniture or
		clothing not intended for
		the consumer
		iii. consumer manipulated
		into giving away money
		or personal property
		iv. disappearance of personal
		property
		v. transfer of property,
		savings, or insurance
1		vi. change in cash flow
		—vii. change in will
		——_viiidepleted bank
1	_	accounts
	6.	Types of abuse, neglect, and
1	_	exploitation
	7.	
		a. argumentative behavior
		b. assaultive behavior
		c. demanding behavior
		d. hostile behavior
		e. incompetence
		f. organic brain syndrome
		(OBS)
		g. dementia
I		h. incontinence
		i. intrusive behavior
-		j. manipulative behavior
1 -		k. inability to communicate

	1. passive aggressive behavior
	m. verbally abusive behavior
4. Recognize signs and symptoms of abuse	n. substance abuse
resident and the second second	i. intrusive behavior
(verbal, physical, psychological, and	o. sexual acting out
(· • • • • · · · · · · · · · · · · · ·	j. manipulative behavior
sexual), as well as, exploitation and neglect.	
50114411), 45 (1011 45, 011p1014415) und 110g1001	k. inability to communicate
(continued)	A. l. passive aggressive behavior
(************************************	m. verbally abusive behavior
	n. substance abuse
	o. sexual acting out behavior
	B. Signs and symptoms as indicated in-
PSS manual	
1 55 manuar	——1.—_suspicious injuries
	—excessive punishment
	—3.—_emotional or mental injury
	or-
	impairment
	—
	shelter, supervision, or health
	care
	—6.—_deprivation of normal
	childhood living experience
	(emotional <u>neglect)</u>
	· · · · · · · · · · · · · · · · · · ·
	7. failure to protect a child from abuse or neglect
	8. children who are abandoned
	——9.—_parents who don't safely care for-their children
	C. Factors associated with abuse and
	—neglect
	—1.—_family isolation
	—2.—_misunderstanding of a
	child's
	—_physical or emotional and
	—developmental needs
	—3.—_family under severe stress
	—4.—_alcohol or drug abuse
	5parents who were abused or
	<u>neglected</u>
	6. parents overwhelmed by the
	—_responsibility of caring for their
	—children
	—7.—_mental or physical health
	problems
	—8.—_family violence

-	<u>4</u> .	Recognize signs and symptoms of abuse		9. low self-esteem
-		(verbal, physical, psychological, and		- of child _
			<u>10</u>	. poor control over emotions
-		sexual), as well as, exploitation and neglect.	1 0	D. Risk factors
-		(continued).		amily violence/assaultive
-				ehavior
_				lcohol/drug abuse by
-				arent/caretaker
-				earent/child conflict nental/physical health
_				roblem of child
-			_	_severe acting out behavior
-				school problems
				divorce conflict
				child withdrawn/depressed
				– runaway
				alcohol/drug abuse by child
				non-organic failure to thrive
I				child
			D. E.	Types of services
				_1.—_child protective
				_2.—_day care
				_3.—_counseling for parents
				_4.—_homemakers
				_5.—_substance abuse treatment
				_6.—_family violence programs
			<u> </u>	_7.—_temporary shelter for teens
			<u> </u>	_8.—_short term family
				_9.—_parent education
				10.—_public health nursing
				eporting child abuse and neglect
				professionals that must report
			<u> FG</u> .	Reporting procedure
			1.	DHHS
				a. telephone
				b. written report
				i. identifying information
				on the family
				ii. nature and extent of the
				abuse or neglect
				iii. family composition
	ת			iv. the source of the report
4		cognize signs and symptoms of abuse		v. where that person can be
-	(Ve	erbal, physical, psychological,		contacted
		sexual), as well as, exploitation and neglect		c. confidentiality
l	-	<u>(continued).</u>		d. immunity
I			G H.	e. liability for failure to report Child protective services
1			U П.	Cima protective services

1. the child's rights

2. parent's rights (when receiving

- child protective services) 3. parent's rights (child protection order) 5. Explain your responsibilities in reporting 1. Mandatory reporting known or suspected abuse, neglect, or A. Individuals who are mandated to exploitation – including the consequences report in a professional capacity B. Other individuals who are for not reporting. mandated to report C. Facility reporting D. Optional reporting E. Where to report 1. Adult Protective Services, Office of Elder Services at DHHS 2. Behavioral Health 3. licensed nursing facilities to DHHS, Division of Licensingand Regulatory Services F. Immunity G. Confidentiality 2. Other resources and interventions
- 6. Explain what ethics means and how it applies in the health care and human service fields.
- 1. Ethics

A. APS

B. Long-Term Care Ombudsman-Program

Unit IV

Communication

- 1. Identify the parts (e.g., sender, message, receiver) and the potential barriers to communication.
- 2. Identify the methods of communication (e.g., verbal, body language, and listening).
- 3. Explain the active listening strategy for improving communication.
- 4. Explain appropriate communication between health care and human service workers and consumers.
- 5. Explain appropriate communication between an employee and others including; staff members, supervisors, family, and friends.
- 6. Describe strategies for communication with people that have physical, emotional, cultural, and social impairments.

Unit IV Communication

Objectives

1. Identify the parts (e.g., sender, message, receiver) and the potential barriers to communication.

Content

- 1. The communication process has three main components
 - A. Sender
 - B. Receiver
 - C. Message
 - 1. feedback
 - 2. clarify
 - D. Barriers to communication
 - 1. uncommon language foreign languages
 - 2. speech difficulties
 - 3. hearing impairment
 - 4. body language and message incongruent
 - 5. background noise and lights
 - 6. other people in area
 - 7. processing difficulties
 - 8. emotions
 - 9. work behavior
- 2. Identify the methods of communication (e.g., verbal, body language, and listening).
- 1. Setting the stage for communication
 - A. Introduce yourself
 - B. Greet the person
 - C. Knock on the door before entering person's room or house
 - D. Choose an appropriate place for the type of conversation
 - E. Cultivate friendly and trusting relationships
- 2. Verbal/oral communication
 - A. Key components
 - 1. voice tone and language usage
 - 2. content/message
- 3. Nonverbal communication
 - A. Body language
 - 1. facial expressions
 - 2. eye contact
 - 3. touching
 - 4. personal space
 - 5. distance
 - a. intimate distance
 - b. personal distance

Content

Objectives

2. Identify the method	ods of communication		c. social a. intimate distance
	language, and listening).		b. personal distance
(continued)			c. social distance
			d. public distance
			4. gestures and movements
			——7 <u>5</u> . silence
3. Explain the active	e listening strategy for	1.	Active listening
improving commu	unication.		A. Silence
			B. Eye contact
			C. Body language
			D. Vocal expressions
			E. Facial expressions
			F. Focus
			G. Avoid judgment
			H. Reflect
			I. Ask questions
			J. Restate the message
			K. Obtain more information
			L. Clarify and summarize
4. Explain appropria	ate communication are and human service	1.	Communicating with consumers A. Non-judgmental, consumer focused,
workers and const			respectful listening
workers and const	amers.		B. Empathetic and supportive emphasis
			C. No distractions
			D. Disrespectful No disrespectful,
! 			humiliating, or aggressive behavior is not tolerated
			E. Emphasis is placed on collaborative
			communication
			F. Information is shared on a "need to
			know" basis
5. Explain appropria		1.	Communicating with other staff
between an emplo	-		_members
<u> </u>	embers, supervisors,		A. Communicate with each other about
family, and friend	S.		key situations and events
			B. Emphasize team responses to
			situations and events
1			C. Formally discuss policy and methods
	te communication———		-D. Discuss consumer needs and
management or ov	-		
between an emplo	~		E. Communicate mutual problems,
_	embers, supervisors,——		<u>dissatisfactions</u> , and conflicts
family, and friend	s. (continued)		F. Regular communication

G. Recognizes own responsibility for
his/her own communication

- 2. Communicating with your supervisors
 - A. Supervisor to staff
 - 1. direction, support, or other input
 - B. Staff
 - 1. communicate regularly
 - 2. use tact, patience, and objectivity
 - 3. find solutions
 - 4. communicate clearly
- 3. Communicating with family and friends
 - A. Encourage engagement
 - 1. visitation
 - 2. other involvement
- 6. Describe strategies for communicating with people that have physical, emotional, cultural, and social impairments.
- 1. Communicating with selected consumers
 - A. A person who is hard of hearing
 - B. A person who is deaf
 - 1. American sign language
 - 2. <u>American Disabilities Act</u>
 (ADA)
 - C. A person who is visually impaired
 - D. A person who experiences aphasia
 - E. A person with Alzheimer's or related disorders
 - F. Non-responsive or withdrawn people
 - G. A person from another country or culture
- 2. Common communication methods
 - A. Sign language
 - B. Pictures or picture graphs
 - C. Pencil and paper
 - D. Computers
 - E. Magnetic letters and boards

Unit V

Observation, Reporting, and Documentation

- 1. Describe the requirements concerning observation, reporting, and documentation, including the right to confidentiality.
- 2. Describe the difference between objective and subjective observations.
- 3. Relate observation skills to the collection of information about the consumer and how this relates to report writing.
- 4. Describe the elements of good reporting.
- 5. Identify situations that require an incident report to be written.
- 6. Explain the function of documentation and why documentation is an important and necessary part of the job.
- 7. Describe the characteristics of good documentation.

Unit V

Observation, Reporting, and Documentation

—Objectives

1. Describe the requirements concerning observation, reporting, and documentation, including the right to confidentiality.

- 2. Describe the difference between objective and subjective observations.
- 3. Relate observation skills to the collection of information about the consumer and how this relates to report writing.
- 4. Describe the elements of good reporting.

Content

- 1. Observations
 - A. Vital signs
 - B. Weight gain or loss
 - C. Skin color, temperature, and moisture
 - D. Appetite
 - E. KindType or level of activities
 - F. Complaints of pain or discomfort
 - G.- Ambulation
 - H. Breathing
 - I. Mood or emotional state
 - J. Relationships with others
 - K. Behavior
 - L. Hearing and vision
 - M. Self care ability
 - N. Symptoms such as headache or swelling anywhere on the body
- 1. Objective versus subjective observations
 - A. Objective observation
 - B. Subjective observation
- 1. Reporting observations
 - A. Complete and detailed
 - B. Factual
- 1. Report writing
 - A. Complete
 - B. Factual
 - C. Neat and easy to read
 - D. Appropriate grammar, spelling, and punctuation
 - E. Appropriate use of medical terms and abbreviations

Objectives

5. Identify situations that require an incident report to be written.

- 6. Explain the function of documentation and why documentation is an important and necessary part of the job.
- 7. Describe the characteristics of good documentation.

Content

- 1. Incident reports
 - A. Situations that may require an incident report
 - 1. consumer injury
 - 2. consumer to consumer altercation or fight
 - 3. visitor injuries
 - 4. missing possessions
 - 5. consumer elopement (consumer runs away)
 - 6. medication error (some facilities use special medication error forms for this purpose)
 - 7. staff to consumer altercations
- 1. Documentation
 - A. Uses of documentation
 - B. Key functions
- 1. Documentation rules
 - A. Timeliness
 - B. Legibility
 - C. Grammatically correct
 - D. Appropriate spelling and punctuation
 - E. Appropriate use of ink
 - F. Date and time recorded
 - G. Entries signed
 - H. <u>JargonAbsence of jargon</u> and medical_terminology-

avoided

- I. Approved abbreviations
- J. Specific, detailed statements
- K. Document consumer's
 - 1. responses
 - 2. refusal of care
 - 3. medical therapeutic services
 - 4. outside services
- L. All lines filled
- M. No eraserserasures
- N. Document care you provide only
- O. No reference by name in a file
- P. Use of quotes
- Q. Document late entries

0	bjectives	Content
7.	Describe the characteristics of good	2. Entries in files or charts
	—documentation (continued).	A. Observed changes in a person's
		behavior or condition
		B. Dates and explanations of family,
		doctor, social worker
		C. Incidents or accidents involving a consumer
		D. Consumer involvement in social or
		recreational events, in or out of facility
		E. Action taken on any element of the
		consumer's service plan
		F. Effectiveness of, impact of, or
		changes in, the service plan
		G. Staff comments regarding the
		consumer's adjustment to his/her
		home environment or facility
		H. Consumer's refusal of any form of established treatment or intervention
		I. Errors in medication (if you are
		authorized to pass medication)
		3. Refusal of care or refusal of treatment
		reports
		A. What was refused and when it was
		_refused
		B. Why it was refused
		—C. Alternatives or substitute care offered
		D. Explanation of why the particular
		care should be permitted by the

consumer

Unit VI

Health, Safety, and Fire Prevention

- 1. Describe the common causes of injury.
- 2. Describe the general rules of environmental safety.
- 3. Describe the proper techniques and equipment for lifting and moving people.
- 4. Explain the basic concepts of fire prevention.
- 5. Explain what to do in the event of a fire.
- 6. Describe the safety precautions necessary when oxygen is being used.
- 7. Identify hazardous materials and explain how to handle them appropriately.
- 8. Explain what to do when you encounter workplace violence.
- 9. Explain the principles of defensive driving.
- 10. Explain basic infection control procedures and the importance of proper hand washing.
 - ++10. Explain the role of first responder.

Unit VI

Health, Safety, and Fire Prevention

Objectives Content 1. Describe the common causes of injury. 1. Common <u>causes</u> of <u>injury</u> A. Falls B. Hypothermia C. Burns D. Electrocution 2. Describe the general rules of environmental 1. Environmental safety A. Fall hazards safety. 1. frayed carpet and scatter rugs 2. loose tiles or lifted linoleum 3. wet floors 4. cluttered hallways or paths 5. presence of ice or snow 6. lack of appropriate footwear 7. defective walkers, canes, or mobility equipment 8. poor lighting 9. inadequate handrails on staircases 10. pets that are underfoot B. Prevention of <u>hypothermia</u> 1. warm clothing 2. hot foods and liquids 3. appropriate thermostat setting 4. fuel assistance and home winterization programs C. Prevention of burns 1. supervise consumer when hot liquids when provided toconsumerare served 2. test water temperature when preparing bath 3. supervise consumers in baths 3. check water heater thermostat-level D. Reducing risk of electrocution 1. inspect for frayed cords or damaged plugs 2. do no-not overload electrical circuits

3. report unsafe items

Describe the general rules of environmental—safety (continued).	4. use items with a "UL" tag on them 5. do not repair electrical equipment yourself 3. report unsafe items 4. use items with a "UL" tag on them 5. do not repair electrical equipment yourself 6. turn off and unplug items that smoke 7. unplug countertop appliances when not in use
3. Describe the proper techniques and equipment for lifting and moving people.	 Lifting and moving Risk factors overexerting performing multiple lifts lifting alone lifting uncooperative or confused consumers lifting consumers who cannot support their own weight lifting consumers who are heavy performing work beyond your physical capabilities moving an object or a consumer improperly moving consumers who are in confined spaces or awkward positions ineffective training of employees in body mechanics not using proper equipment Guidelines for proper lifting/moving Never transfer off balance Avoid heavy work with spine rotated Lift heavy loads close to your body Avoid vertical "dead-lifts" Never risk over exertion Use team lifts and mechanical devices when necessary Properly place and adjust lifting equipment

4. Explain the basic concepts of fire prevention. 1. Fire <u>safety</u> and <u>prevention</u>

	A. Fire Safety
	1. Agency's/facility's policy and
	procedures
	1. fire evacuation plan
	32. escape routes
	4 <u>3</u> . emergency phone numbers
	a. fire alarms
	b. fire doors and fire escapes
	c. sprinklers
	d. fire extinguishers
	B. Fire prevention
	1. fire triangle
	a. fuel
	b. oxygen
1	c. heat source
	—C. Common <u>fire hazards</u>
	1. newspapers and books stacked
	near heat source
	2. paint rags
	3. frayed electrical cords
	4. overloaded electrical circuits
	5. bare wires on lamp plugs
	6. smoking in rooms where oxygen
	is being used
	7. cigarette lighters and matches
	8. stove burners
	9. combustible chemicals
	———10. consumers smoking in bed
5. Explain what to do in the event of a fire.	1. What to do if a fire occurs
	A. Remove
	B. Activate
	C. Contain
	D. Extinguish
	E. Fire extinguisher use
	1. fire extinguisher ratings
	a. class A
	b. class B
	c. class C
	d. multi-class ratings
	F. Pass
	1. P ull
	2. A im
	3. Squeeze
	4. Sweep
	S.1100p
6. Describe the safety precautions necessary	1. Oxygen <u>safety</u>
when oxygen is being used-	A. Oxygen delivery
when oxygen is being useu.	11. Oxygon donvory

		 wall outlets oxygen tanks oxygen concentrators Safety rules for oxygen use: "no smoking" signs no smoking in the consumer's room matches, lighters, and smoking materials removed electrical equipment monitored flammable materials removed avoid wool and synthetic fabricavoide
7. Identify hazardous materials and explain how to handle them appropriately.		Hazardous materials A. Proper labeling B. Material Safety Data Sheets (MSDS) Using cleaning products safely A. Tips for safety (the do's) 1. read and follow label directions 2. store cleaning products away from food 3. keep products in their original containers 4. put cleaning products away immediately after use 5. keep buckets with cleaning solutions out of the reach of consumer and pets 6. properly close all containers 7. ventilate areas where cleaning products are being used
7. Identify hazardous materials and explain how to handle them appropriately	n	B. Tips for safety (the don'ts) 1. mix cleaning products 2. reuse an empty cleaning product container 3. preventing accidental poisoning C. Definition of poison D. Dangerous poisons 1. medicines 2. cleaning products
	_	3. antifreeze 4. windshield washer fluid 5. hydrocarbons 6. carbon monoxide 7. pesticides 8. wild mushrooms E. Poison-proof home (checklist)

- —<u>P</u> <u>F</u>. What to do if a poisoning occurs
 - 1. stay calm and notify your supervisor
 - 2. call your poison control center
 - 3. information provided to the poison control center
 - a. the person's condition, age, and weight
 - b. product containers and bottles
 - c. time that the poisoning occurred
 - d. your name and telephone number
 - 4. follow the instructions from the poison center
- 8. Explain what to do when you encounter workplace violence.
- 1. Workplace violence
 - A. Employee involvement
 - understand and comply with the workplace violence prevention program
 - 2. participate in procedures covering safety and security concerns
 - 3. report violent incidents
 - 4. take part in continuing education programs
 - ___5. discuss concerns with your supervisor

{All requirements regarding defensive driving have been removed}

- 10. Explain basic infection control procedures and the importance of proper hand washing.
- 1. Basic infection control
 - A. Bacteria and viruses
 - 1. pathogens
 - 2. infections
 - 3. Contagions contagions
 - B. Preventive measures
 - 1. universal/standard precautions
 - a. engineering controls
 - b. work practice controls
 - c. personal protective equipment (PPE)
 - d. hand washing
 - C. Housekeeping
 - D. Decontamination
 - 1. asepsis definition

2. response to exposure

a. cleanse the exposed areab. flush eyes, mouth, and nose

	when in contact with blood c. tell your supervisor
4410. Explain the role of first responder.	1. Basic first aid
	A. Steps to take in every emergency (Check Call Care)
	2. Anaphylaxis
	3. Asthma
	4. Bleeding
	5. Hemophilia
	6. Bites (animal and human)
	7. Rabies
	8. Burns and scalds
	A. Chemical burns
	B. Sunburn
I	9. Choking
10 E 1: (1 1 CC / 1	10. Unconscious <u>adult</u>
10. Explain the role of first responder	11. Epilepsy
<u>(continued).</u>	A. Major seizure
	B. Minor seizure
	12. Eye injuries
	13. Fainting 14. Fractures
1	15. Frostbite
	A. Frost nip
	16. Head injuries
	17. Heart attack
	18. Heat related conditions
	19. Hypothermia
	20. Poisoning
	21. Recovery position
	22. Shock
	23. Sprains
	24. Strain
	25. Stroke
	A. Transient Ischemic Attack (TIA)

Unit VII

Becoming a Certified Nursing Assistant

At the <u>Upon</u> completion of this unit the student will be able to:

- 1. Describe the roles of the health care team as they relate to the CNA.
- 2. Describe the CNA's function on the health care team.
- 3. Describe regulatory aspects of health care important to the CNA.
- 4. Discuss observation, reporting, and the patient care plan specific to the CNA role.
- 5. Discuss appropriate patient/CNA interaction.
- 6. Discuss patient safety issues specific to the CNA role.
- 7. Discuss human growth and development.

Unit VII

Becoming a Certified Nursing Assistant

Objectives Content

Nursing care team A. Administration B. Licensed nursing staff 1. RN 2. LPN C. Unlicensed staff 1. CNA 2. Home Health Aide (HHA) 3. Certified Nursing Assistant- Medications (CNA-M) 4. Certified Residential Medication Assistant (CRMA) 5. PSS 6. homemaker 7. all others
CNA's function within the team Lines of authority CNA rights and responsibilities A. Reporting general concerns B. Discipline C. Delegation issues 1. appropriate 2. inappropriate Substance abuse Diversion of supplies, equipment, and drugs Confidentiality Definition of inappropriate conduct
Chapter 5: Regulations Relating to
Training Programs and Delegation by Registered Professional Nurses of Selected Nursing Tasks to Certified Nursing Assistants Law Regulating the Practice of Nursing ——2. Maine State Board of Nursing Chapter 5: Regulations Relating to
Nur: Law

	By Registered Professional Nurses of
	Selected Nursing Tasks to Certified
_	Nursing Assistants
Objectives	Content
3. Describe regulatory aspects of health care	3. Public Law 195: An Act to Provide
— important to the CNA. (continued)	Qualified Nursing Assistant Services
	Medicare and Medicaid-
	Programs: Nurse Aide Training and
	Competency Evaluation Programs.
	4. Title 22, Chaptor 405, Section 1812-6,
	Maine Registry of Certified Nursing
	Assistants
-	5. Chapter 42 State CNA Law
	— 6. CNA testing process (Federal OBRA
	Law)
	7. Chapter 245 Maine Department of
	Education Rules Relating to Education
	Programs
	— 8. 6. Chapter 245 Programming for
	Certified
	Nursing Assistants (Department of
	Education).
	7. Incident reporting
	A. Types (patient/visitors/employee)
I	B. Reporting procedures
4. Discuss observation, reporting, and the	1. Describe types of reporting
patient care plan specific to the CNA role.	A. Objective signs
	B. Subjective symptoms
	2. Examples of general patient observations
	(see appendix A)
	3. Describe the CNA's responsibility in
	observing and reporting changes in the patient's condition
	A. Formal input (participating in patient
	care conferences)
	B. Informal input (communicating on a
	daily basis with staff members/shift
	report)
	4. Describe the components of the patient
	care plan
	5. Identify the individuals who develop the
	patient care plan and their-
1	1

	responsibilities 6. Implement delegated tasks of the patient care plan as defined by each individual facility and within the guidelines of the Maine State Board of Nursing
5. Discuss appropriate patient/CNA interaction.	 Patient populations and special communication needs (physical and-emotional) A. Pediatric B. Geriatric
5. Discuss appropriate patient/CAN interaction.	C. PsychiatricD. Obstetrical
(continued)	E. Medical F. Surgical
	 Surgical Explain procedures to be performed.
	3. Refer questions to appropriate health
	care team members
	4. Display courtesy to patients and visitors
	5. Display emotional control 6. Exhibit asympathy/ampathy/tact
	6. Exhibit sympathy/empathy/tact7. Exhibit sensitivity
	Explain procedure for answering the patient call bell
6. Discuss patient safety issues specific to	1. Age related safety issues
the CNA role.	2. Fall prevention (intrinsic vs. extrinsic factors)
	3. Discuss the use of oxygen equipment
	A. Central oxygen
	B. Concentrator
	C. Oxygen tankD. Cannula
	E. Mask
	F. Tent
	G. Tubing/checking for kinks
	4. Examples and care of hazardous
	chemicals A Hazardous Communication Program
	A. Hazardous Communication ProgramB. Care of patients with radium
	implants
	C. Care of patient receiving
	chemotherapy treatments
	1. discarding excretion
	 Protective Devices A. Regulations: OBRA mandated
	restraint free environment in long

term care facilities

B. Complications of restraint use

	1
Objectives	Content
6. Discuss patient safety issues specific to ——the CNA role (continued).	C. Indications for use of restraints in certain medically indicated situations
 	 MD order consultation with family
-	D. Demonstrate proper use of the
	various protective devices
	(restraints)—— 1, including proper fit and
	2. the C N A's role in the patient's
	<u>care</u> 1. use of manufacturer instructions
	for application
	2. documentation 4.3. guidelines for release
	E. Alternative safety methods
	1. resident specific care plan
	development 2. "enablers"
	3. electronic alarm system
7. Discuss human growth and development.	1. Describe Maslow's hierarchy of needs
	A. Physical
	B. Security C. Social
	D. Esteem
	E. Self actualization
	2. Explain ways to meet the patient's needs
	3. Recognize psychological reactions to
	<u>illness</u>
	4. Discuss the importance of cultural
	diversity among all people
	 Explain how to respond appropriately to visitors
	6. Define the life stages, including
	prenatal through geriatrics
	7. Discuss the stages of dving and death

Unit VIII

Infection Control

By the

<u>Upon</u> completion of this unit the student will be able to:

- 1. Describe the difference between pathogens and non pathogens.
- 2. Identify six conditions needed by microorganisms to live and grow.
- 3. Identify the signs and symptoms of an infection.
- 4. Define asepsis, disinfection, and sterilization.
- 5. List the conditions necessary for a pathogenic microorganism to become a disease.
- 6. Explain how microorganisms are transmitted.
- 7. Discuss the importance of proper hand washing.
- 8. Identify and describe the different types of isolation techniques (carry out instructions according to Center for Disease Control (CDC) guidelines).
- 9. Demonstrate infection control procedures.
- 10. Discuss the psychosocial effect of isolation on the patient.
- 11. Discuss how policies and procedures for infection control differ in various settings.

Unit VIII

Infection Control

Objectives	Content
Describe the difference between pathogens and non pathogens.	 Define A. Pathogens B. Non pathogens Discuss normal flora
2. Identify six conditions needed by microorganisms to live and grow.	 Reservoir Moisture Nourishment Oxygen/lack of oxygen Warm environment Dark environment
3. Identify the signs and symptoms of an infection.	 Redness Swelling Heat Loss of function Pain
4. Define asepsis, disinfection, and sterilization.	 Explain the principles of: A. Asepsis B. Disinfection C. Sterilization Define contamination Discuss clean versus dirty work areas
5. List the conditions necessary for a pathogenic microorganism to become a disease- and how the body's defenses are used to fight infection.	 SourceInfectious agent Reservoir/host —Portal of exit Method of transmission Portal of entry into the susceptible host Susceptibility of host
Explain how microorganisms are transmitted.	 Describe the following methods of spreading disease A. Contact (direct vs. indirect) B. Droplet C. Airborne D. Vector E. Common vehicle

—— Objectives	Content
7. Discuss the importance of proper healthcare	1. Discuss the impact of nosocomial
hand washing.	acquired (nosocomial) infections
υ	2. Demonstrate hand washing
	3. Use of alcohol based sanitizers
8. Identify and describe the different types	1. Standard precautions
of isolation techniques (carry out instructions	according to the
	A. Modes of transmission
CDC guidelines	2. Special considerations given to patients
according to CDC guidelines)	in unique settings , and
	immunocompromised patients. Patients
<u>with</u>	A. Burns
	B. Transplants
	C. Patients receiving chemotherapy
	D.– Blood borne pathogens-
	Occupational
	Safety and Health Administration
	Standard (OSHA)
	1. Human Immunodeficiency Virus
	(HIV) positive patients
	2. Hepatitis types
	3. Other blood borne pathogens
	E. Tuberculosis (TB) patients
	F. Methicillin-Resistant
Staphylococcus	1. Welliellill Resistant
Suprificed	Aureus (MRSA)
	G. Scabies
	H. Clostridium Difficile (C Diff)
	— I. Vancomycin Resident Resistant
	Enterococcus (VRE)
	J. Influenza A/RSV
	K. Pandemic flu
	K. Tandenne nu
9. Demonstrate infection control procedures.	1.—_Demonstrate proper technique for _
F	utilizing personal protective
	equipment (PPE) using (CDC) and OSHA
	2. Demonstrate double-bagging technique
	guidelines

- 10. Discuss the psycho social effects of isolation on the patient.
- 1. Effect of seclusion
- 2. Biases
- 3. Effects on families and visitors
- 4. Time management
- 5. Limitations of isolation

Objectives

- 11. Discuss how policies and procedures for infection control differ in various settings.
- 1. Acute care
- 2. Long term care
- 3. Home care
- 4. Residential care (Assisted Living)

Unit IX

Patient Environment

By the Upon completion of this unit the student will be able to:

- 1. Describe the patient unit in various settings.
- 2. Describe the purpose of proper bed making for patient comfort.
- 3. Describe the admission procedure.
- 4. Describe the transfer procedure.
- 5. Describe the discharge procedure.
- 6. Describe the CNA's role in the postmortem procedure.
- 7. Identify the OBRA regulations related to the long term care environment

Unit IX

Patient Environment

Objectives	Content
Describe the patient unit in various settings.	 Types of beds Transfer equipment Bedside equipment Types of patient call systems Disposable equipment Specialized equipment Standard equipment and supplies in patient rooms
Describe the purpose of proper bed making for patient comfort.	 Patient comfort A. Cleanliness B. Wrinkle-free C. Patient well-being D. Handling of linens-infection control measures Types of bed making A. Open B. Closed C. Occupied D. Surgical Demonstrate bed making procedures Identify the OBRA regulations related to siderails/mattresses, room temperature
3. Describe the admission procedure.	 Admission check list Collection of appropriate specimens Clothing list Valuables list Admission kit Orientation to the unit Observation/reporting/documentation Patient comfort Demonstrate scales and procedures for obtaining weight and height measurements Describe psychosocial issues of newly admitted patients
Objectives	Content

4. Describe the transfer procedure.	 Procedure for handling belongings of the patient Safety in transporting A. Equipment issues B. CNA role in complex transfer Emotional support Discuss reasons for transfers
5. Describe the discharge procedure.	 Explain the discharge process to the patient
5. Describe the discharge procedure. (continued)	 Check the patient's belongings and valuables Discuss safety factors Demonstrate care of the unit after discharge Discuss the tasks of the CNA in the
	discharge procedure-facility specific
6. Describe the CNA's role in the postmortem —procedure.	 Discuss religious customs Demonstrate postmortem care-facility specific Discuss care of the patient's belongings and valuables Discuss type of equipment needed

Unit X

Caring for the Patient (Sections A-JM)

At the Upon completion of this unit the student will be able to:

- 1. Name and locate, on diagram, the structures of each system.
- 2. Define the common medical terms related to each system.
- 3. Describe the normal functions of each system.
- 4. Describe the common diseases/disorders of each system.
- 5. List observations to be reported by the CNA to the nurse.
- 6.— <u>Discuss wellness and prevention of disease in all people across the lifespan.</u>
- 7. Demonstrate procedures related to the care of patients with abnormalities of common diseases of each system and disorders that affect the major organs as well as health maintenance practices.

A. Introduction to Anatomy and Physiology

Objectives

1. Define anatomy and physiology.	1. Discuss the terms anatomy/physiology
2. Define appropriate medical terminology.	1. Roots, suffixes and prefixes
3. Define anatomical positioning.	Planes, body cavities and body organization
4. List the main parts of the cell and their function.	 Cell membrane Cytoplasm Nucleus
35. Identify the different types of tissue and their function.	 Epithelial Connective Muscle Cardiac Nervous Blood/lymph
4. Define 6. Identify organs.	1. List organs and give their function
5. Define 7. Identify systems.	1. List systems and give their function
8. Identify wellness and prevention strategies for each system.	 Homeostasis Preventive measures for maintaining each system
9. Identify common categories of disease.	Risks for diseases and disorders such as diabetes, heart disease, obesity, sexually transmitted diseases (STDs) and ways to prevent the diseases

B. Care of the Patient with Patient's Skin-Disorders

Objectives Content 1. Name and locate, on a diagram, the structures 1. Layers of the integumentary system. A. Epidermis B. Dermis C. Subcutaneous Name and locate, on a diagram, the structures 2. Appendages A. Hair B. Nails 3. Glands A. Sudiferous B. Sebaceous 2. Describe the functions of the integumentary 1. Coverage and protection 2. Regulation of body temperature system. 3. Storage 4. Elimination 5. Sensory perception 3. Define common medical terms related to 1. Cyanosis 2. Jaundice skin disorders. 3. Erythemia 4. Eschar 5. Mottling 6. Petechia 7. Hypopigmentation 8. Ecchymosis 9. Hematomas 10.-_Radiation marks 11.–Burns (degrees) 12. Effects of aging 4. Describe common diseases/disorders of the 1. Acne integumentary system. 2. Herpes Zoster/Simplex 3. Impetigo 4. Hives 5. Ulcers A. Decubitus B.a). Arterial Cb). Venous c). Diabetic d). Terminal ulcer

e). Pressure sores

6. Pediculosis

	 7. Scabies 8. Cellulitis 9. Lymphedema 10. Dermatitis 11. Skin lesion
-	12. Excoriation
4. Describe common diseases/disorders of the	
integumentary system(continued).	14. Shearing
integrationary system continuery.	17. Shearing
5. List the observations to be reported by the	, 1
CNA to the nurse.	 Texture-rough, smooth, scaly, flaky, dry, moist, diaphoretic
	3. Location and description of rashes
	4. Abrasions, punctures, lacerations, ecchymosis, and hematomas
	5. Pale, ashen-gray, jaundice, cyanotic, and reddened areas
	6. Drainage or bleeding from wounds or
	body orifices
	7. Skin temperature (warm, hot, cool, cold)
	8. Complaints of Patient reported pain or
d	iscomfort
6. Demonstrate procedures related to the	-1. Bathe a patient
integumentary system.	A. Bed bath
integamentary system.	B. Shower
	C. Tub bath-or/whirlpool
	D. Remove facial hair
	- 1. safety razor/electric razor
	E. Bathe an infant/child
	F. Discuss the care of the umbilical cord
	2. AdministerPerform back care
	-3. Provide personal grooming
	A. Hair (comb, shampoo and trim)
	B. Nail care (cut toe and finger nails)
	C. Foot care
	- 1. soaks
	2. lotions
	4. Nail care
	1. clip toenails and finger nails
	2. clean
	5. Provide special skin care (according to
	facility/organizational policy) topical
	- creams, ointments, and lotions
	A. facility/organizational policy)
	topical creams, ointments, and lotions to
	intact skin
	A. Over-the-counter non prescription
	71. Over the counter non prescription

6. Demonstrate procedures related to the —integumentary system (continued).	B. Apply lotion to dry areas C. Give back and pressure point massages D. Make wrinkle free bed 6. Obtain body temperature A. Oral B. Rectal C. Axillary D. Tympanic E. Other 7. Apply bed cradle 8. Apply heel and elbow protectors 9. Use special mattress/cushion egg crate, alternating pressure, other 10. Use positioning devices A. Handrails B. Trochanter rolls C. Sandbags and airbags D. Gel-foam pads 11. Apply simple non sterile dressings (according to facility/organizational policy) 12. Apply simple sterile dressings (according to facility/organizational

C. Care of the Patient with Musculoskeletal System Disorders Patient's Skeletal System

Objectives

Content

		J		
	1.	Name and locate, on a diagram, examples of the major bones.	 Skull bones Humerus Radius Ulna Pelvis Tibia Fibula Vertebra 	
ĺ	2.	List types and give examples of each type of bone.	 Long-femur Short-metatarsals Irregular-vertebra Flat-scapula 	
	3.	Define the functions of the skeletal system.	 Supports and gives shape to the bo Protects internal organs Permits movement Stores calcium and phosphorous Produces blood cells 	ıdy
	4.	Define the different types of joints.	 Ball-and-socket Hinge Pivot Immovable 	
	5.	Describe the functions of joints.	 Connects muscle to bone (tendons) Connects bone to bone (ligaments) 	-
	6.	Describe common medical elements/terms related to the skeletal system.	 Cerv-cervical Cost-epicostal Crani-craniotomy Ili-ilium Stern(o)-sternum Peri-periosteum Arth-Arthrectomy Osteo-osteoarthritis Itis-arthritis Osis-kyphosis Arthroplasty Oma-osteoma Continuous Passive 	<u>e</u> _

Motion Machine (CPM)

7. Describe common diseases/disorders of	1. Arthritis
the skeletal system.	2. Rheumatoid arthritis
	3. Fractures (examples)
	A. Pathological
	B. Compound
	C. Green stick
	DImpacted
	4. Osteoporosis
	5. Amputation of a limb
	6. Osteoarthritis/Degenerative
	Joint Disease (DJD)
	7. Bone tumors
	8. Scoliosis
	9. Osteomyelitis
7. Describe common diseases/disorders of	10. Bursitis
	11. Fractured hip
	A. Total hip/knee replacement
	12Ruptured disc

D. Care of the Patient's Muscular System

Objectives

1. Name and locate, on a diagram, examples of the major muscles.

- 2. List types and give examples of each type of muscle tissue.
- 3. Describe the functions of the muscular system.
- 4. Explain how groups of muscles work together to form body motion.
- 5. Identify the types of motion provided by muscles.
- 6. Define common medical terms/elements related to the muscular system.
- 7. Describe common diseases/disorders of the muscular system.

- 1. Deltoid
- 2. Abdominal
- 1. Striated-skeletal-voluntary
- 2. Smooth-visceral-involuntary
- 3. Cardiac
- 1. Movement
- 2. Posture or muscle tone
- 3. Heat production
- 1. Demonstrate movable joints
- 1. Flexion/extension
- 2.—Extension
- 3. Abduction
- 4. /Adduction
- 5.—3. Rotation/internal/external
- 4. Pronation/suppination
- 1. My (o)-myoneuralmuscle
- 2. Rect (o)-rectus
- 3. Sphincter (o)-sphincter
- 4. Duct (o)-abductor
- 5. Flex (o)-flexor
- 1. Muscular dystrophy
- 2. Muscle atrophy
- 3. Myasthenia gravis
- 4. Hernia
- 5. Contractures
- 6. Sprains and strains
- 7. Spasms

	Objectives	Content
1	8. List observations to be reported by the CNA to the nurse. extremities	 Decreased mobility of range of motion Angulation Abnormal alignment of
		3. Complaints of pain on movement4. Swollen joints
		5. Complaints by patient of painful joints
		6. Reddened area over joint
		7. Weakness
	9. Demonstrate procedures related to the musculoskeletal system.	-1. Lift, hold, or move object using proper body mechanics
		2.—Assist the patient to a sitting position
		-3. Move a helpless patient up in the bed
		-4. Move a patient to the head of the bed
ı		with the patient's help
		-5. Roll patient like a log-6. Move a helpless patient to one side of
I		the bed with him/her on his/her back
1		-7. Turn patient on either side
		-8. Transport patient by
I.		wheelchair/stretcher/geri-chair
		-9. Patient from bed to
		wheelchair/stretcher/geri-chair and back to bed
I		10. Move a patient by use of a mechanical
1		lift
		11.Move a patient from bed to stretcher and
•		back to bed
		12.Use, or assist in use of, common
		orthopedic equipment
ı		13.Perform complete or partial range of
		musculoskeletal system. motion
		14. Apply warm and cold packs
		15. Apply moist and dry packs
		16.—_Ambulate patient with one assist
	-	17. Turn the patient with a turning sheet18. Assist with gait training
		19. Assist with gait training 19. Assist patient with a walker/cane
		20. Use transfer board
		21. Use gait belt
		22. Provide care of patient with casts
		23. Splint an extremity

Objectives	<u>Content</u>
9. Demonstrate procedures related to the musculoskeletal system(continued)	24. Ease the patient to the floor in case of — falls or as part of evacuation plan
D.	(CPM) machine per facility policy

	Objectives		Content
1.	Name and locate, on a diagram, the structures of the gastrointestinal system.	2. 3. 4. 5. 6. 7.	Mouth Teeth Tongue Salivary glands Pharynx Esophagus Stomach Small intestine
			Large intestine
			Anus
			. Gall bladder
	-		. Liver
		-13	. Pancreas
2.	Describe the function of the gastrointestinal system.	1.	Discuss how food is changed into a form that can be used by the body
3.	Define common medical terms/elements	-1.	Gastro-stomach
	related to the gastrointestinal system.	-2.	Chole-bile
		-3.	Procto-proctology
			Dyspepsia
			Melena
			Hyperacidity
2	D. C. 11. 14. (1		Anorexia
<u>3.</u>	Define common medical terms/elements	_	Flatus
	related to the gastrointestinal system (continued)		9. Occult Enteritis
	(continued)	-	Phagia-dysphagia
	12		ristalsis
	12.		Reflux
4.	Describe the common diseases/disorders———	1.	Malignancies
	of the gastrointestinal system.		Ulcers
			Hernias
			Gall bladder disorder
			Appendicitis
			Diverticulitis Calific
			Colitis Anal fissure
			Pancreatitis
			Cirrhosis
		-	- Stomatitis
		-	Hemorrhoids

5.	List observations to be reported by the CNA to the nurse.	 Complaints of nausea Vomiting (amount, color, and consistency) Complaints of constipation Abdominal pain Change in eating habits Refusal of food or fluid Stools, (amount, consistency, and frequency of occurrence)
6.	Describe care of the incontinent patient.	 Importance of hygiene Skin care Use of incontinent supplies Bowel retraining
7.	Demonstrate procedures related to the gastrointestinal system.	 Provide oral hygiene Prepare patient for a meal Serve food and remove tray Feed patient Provide personal care after meals Calculate percentage of food consumed
7. ————————————————————————————————————	Demonstrate procedures related to the	7. Provide personal care to a patient with — tubes connected to gravity or suction— drainagea 7. gastrointestinal system (continued). gastrostomy tube A. Care of external tubes and tubing B. Care for the area around an established stoma 8. Provide personal care to a patient with a nasogastric tube
		A. Care of tubes/tubing B. Provide care around the nares 9. Provide personal care to a patient with intravenous therapy (IV) A. Care of external tubing B. Observation of the IV insertion site C. Care of area around insertion site 10. Administer a cleansing enema and
		20. Administer a cleansing chema and commercially prepared enema 8. Insert a rectal tube and flatus bag 9. 11. Insert a non medicated suppository 10.12. Insert a laxative suppository in a patient with a long standing bowel program 11. 13. Administer colostomy/ileostomy care on a well-established colostomy/ileostomy

1	
	14. Assist patient with the bedpan
	13. 15. Offer a portable bedside commode
	14.16. Collect stool specimen
	15.17. Record stool output
	16. 18. Test stools for guaiae hemoccult
	17. 19. Test for gastroccult
	20. Provide care for the patient who is
	—vomiting
	18. A. Positioning
	B. Mouth care
	21. Measure intake and output
	19. Calculate percentage of food consumed
	20. 22. Apply disposable undergarments

E.F. Nutritional Needs of Patients

Objectives

1. Define the different kinds of nutrients.	_1.	Carbohydrates
	_2.	Fats
	_3.	Proteins
	_4.	Water
1. Define the different kinds of nutrients	_5.	Minerals
(continued).	6.	Vitamins
2. List the components of the food pyramid.	1	I ist the 6 food groups and give
examples of —		Food Pyramid
each group	<u> 1.</u>	1 ood 1 yranna
cach group	2	A Discuss the shape of the pyramid in
	4.	-A. Discuss the shape of the pyramid in
		—relationship to servings
3.		B. Discuss a well-balanced diet.
	1.	Dietsthe diets containing a variety
		of foods from the food
		pyramid groups
·		
4. Define a therapeutic diet.	1.	Diet adapted to meet a patient's special
		nutritional needs
5. List various types of therapeutic diets.	1.	Clear liquid
	2.	Full liquid
	3.	Low calorie
	4.	Bland
	5.	Low cholesterol
	6.	Low salt
	7.	Diabetic
	8.	High calorie, high protein
		Liberalized geriatric diet
6. Describe mechanical adaptation of a altered diet	. 1.	Pureed
	2.	Chopped
	3.	Ground
	4.	Soft
	5.	Thickened liquids
•		-
7. Discuss common eating disorders.	1.	Bulimia
	2.	Anorexia
	3.	Compulsive eating disorder
8. Discuss supplements.	1.	Choices for nourishment
o. Discuss supplements.	1.	Choices for hourisillient

- 9. Demonstrate intake/output recording.
- 1. Calculations
- 2. Indications
- 3. Encouraging/restricting fluids
- 4. Documentation
- 5. Household conversions
- 10. Describe patient feeding techniques.

10. Describe patient feeding techniques ——(continued).

- 1. Independent patient
- 2. Dependent patient
- 3. Stroke patient
- 4. Visually impaired patient
- 5. Use of thickeners to support swallowing
- 6. Aspiration
- 12. Discuss alternate feeding methods.
- 1. Enteral/parenteral
- 2. Gastrostomy tubes
- 3. Nasogastric tubes

F.G. Care of the Patient with Patient's Respiratory System Disorders

Objectives

1. Name and locate, on a diagram, the structures	1. Nose/mouth
of the respiratory system.	2. Pharynx
	3. Glottis/epiglottis
	4. Larynx
	5. Trachea
	6. Bronchi
	7. Bronchioles
	8. Alveoli
·	9. Lungs
	_10. Diaphragm
2. Describe the functions of the respiratory	1. Inhalation of oxygen into the lungs
— System.	— system.
	2. Exhalation of carbon dioxide from the
	lungs
3. Define common medical terms/elements	_1. Anoxia
related to the respiratory system.	_2. Pnea-apnea
	_3. Brady-bradypnea
	_4. Tachy-tachypnea
	5. Dyspnea
	_6. Lob-lobectomy
	_7. Orthopnea
	8. Cyan-cyanosis
4. Describe the common diseases/disorders	_1. Upper Respiratory Infections
of -the respiratory system.	ACommon cold
	B.—Sinusitis
	2. Pneumonia
	3. Atelectasis
	4. Cancer
	5. Tuberculosis
4. Describe the common diseases/disorders	6. Chronic Obstructive Pulmonary Disease
	(COPD)
	A. of the respiratory system
	A. Emphysema
	—B.—_Asthma

5.	List observations to be reported by the	1. Difficult breathing
(CNA to the nurse.	2. Bluish-gray skin color
		3. Respiratory rate
		increases/decreaseschanges
		4. Changes in rhythm of respirations
		_5. Respirations becoming shallow or
nois	yRespiration changes such as shallow or noisy	y .
		6. Periods of not breathing
		7. Confusion
		8. Restlessness
		9. Complaints of chest pain
		_10. Coughing up blood
		_11. Breathing with "pursed" lips/nasal
_		flaring
		_12. Use of accessory muscles
		13. Changes in pulse oximetryOximeter
read	ing	
6 1	Describe examples of special considerations	1. Elevate head of bed-semi/fowler's
	given to patients with respiratory	2. Feed slowly
_	impairments.	_3. Limit activity
1	impunments.	4. Consider environmental factors
		A. Powder
		B. Flowers
		C. Body scents
		D. Sprays
		E. Smoke
		F. Climate
1		—G. Animals
		—G. Allinais
7. I	Describe the role of the CNA in assisting	1. General safety considerations
t	the RN with care of the respiratory patient	A. Chest tubes
7	who requires special equipment.	B. Oxygen therapy
8. 1	Demonstrate procedures related to the	1. Pulse oximetry Use pulse oximeter and
	1	report to nurse
ľ	respiratory system.	2. Plug and unplug oxygen for transport
		3. Convert to and from portable oxygen
		tank
1		4. Convert to and from back-up oxygen
		tank
		5. Adjust 02 flow concentration from the
		established oxygen therapy plan
l		supervised by the RN

8. Demonstrate procedures related to the	5. Adjust oxygen flow concentration as
respiratory system(continued).	indicated on the nursing care plan
	6. Assist with the application of positive
	and negative pressure assistive devices
	A. Apply mask
	B. Care for the tubing and humidifier
	C. Assist with application of cough
	assist device (respiratory therapy
	assistive device)

H. Care of the Patient's Cardiovascular System

Objectives	Content
1. Name and locate, on a diagram, the structures of the cardiovascular system.	 Heart Blood Blood vessels
-2. Describe the structures of the heart.	 Auricles/Atria Ventricles Valves Layers A. Epicardium B. Myocardium C. Endocardium
	 5. Pericardium 6. Vessels A. Aorta B. Vena cava C. Pulmonary artery D. Pulmonary vein
3. Describe the function of the heart.	1. The heart receives blood through the veins and pumps it through the arteries to all cells of the body
4. Define the common medical terms/elements related to the cardiovascular system.	 1. Dyserasis Anemia 2. Hema-hematocrit 3. Hemoptysis 4. Occlusion 5. Cardi-Cardiologist 6. Defibrillator
4. Define the common medical terms/elements —related to the cardiovascular system (continued). —	7. Pulm-pulmonary8. Resuscitation9. Vas-vascular10. Defibrillators-implanted
5.—Describe common diseases/disorders of the——cardiovascular system.	 Endocarditis Congestive Heart Failure (CHF) Rheumatic Heart Disease Angina Pectoris Heart murmur Conduction defects requiring a pacemaker
	A. Defibrillator-implanted 8. Atrial fibrillation

6. List the components of blood.	1. Plasma2. Formed elementsA. ErythrocytesB. LeukocytesC. Thrombocytes
7. List the functions of blood.	 Nutrition Respiration Excretion Protection Temperature regulation Distribution of hormones Fluid balance
8. Describe common diseases/disorders blood.	 Hemophilia Leukemia Anemia Sickle cell anemia Polycythemia
9. Name and locate, on a diagram, the different types of blood vessels.	 Arteries Veins Capillaries
10. Describe the functions of blood vessels.	 Arteries-carry blood away from the heart Veins-carry blood to the heart Capillaries-connect arteries and veins; allow exchange of oxygen and carbon dioxide
11Describe common diseases/disorders of the blood vessels.	 Aneurysm Varicose veins <u>Transient Ischemic Attack (TIA)</u> Arteriosclerosis Artherosclerosis Thrombosis Embolism Phlebitis
12. List the organs of the lymphatic system.	 Lymph Lymphatic vessels Lymphatic tissue A. Spleen B. Tonsils C. Nodes

13. Describe the functions of the lymphatic system.	 Filters and destroys invading bacteria Produces lymphocytes and antibodies to protect the body
	3. Relationship to the circulatory system
	A. Returns protein and water to the
	blood
	B. Filters lymph before returning to the veins
14. Describe common diseases/disorders of the	1. Hodgkin's Disease
lymphatic system.	2. Adenitis
	3. Tonsillitis
	4. Infectious Mononucleosis
	5. Splenomegaly
15. List observations to be reported by the	1. Complaint of chest pain
CNA to the nurse.	2. Complaint of pain in left arm and neck
	3. Irregular, weak, or thready pulse
	4. Faintness, dizziness
	5. Shortness of breath (SOB)
15 1 :- 1 - 1 1 1	6. Pale, cold, clammy skin
15. List observations to be reported by the	7. Headache
——————————————————————————————————————	8. Flushed, red face9. Sudden change in behavior
	10Edema in legs, feet, face
	10Edelia in legs, feet, face 11. Shiny, dry, flaky skin
	12. No pulse felt in wrist or feet
	12. No pulse left in wrist of feet 13Observation of patient with a
pacemaker	15Observation of patient with a
	—A. Dizziness
	—B. Shortness of breath
	—C. Irregular pulse
	D. Pulse below pacemaker preset rate
	—E. Hiccups
	14Complaint of indigestion
	15. Changes in vital signs
	A. Rate
	B. Rhythm
	C. Volume
16. Demonstrate procedures related to the	-1. Measure pulse (manually and with
	- Assist patient with deep breathing
cardiovascular and respiratory system.	— doppler)
	A. Radial
	B. Brachial
-	——————————————————————————————————————

 D. Pedal
 E. Carotid
 F. Femoral
—2. Measure respirations
 3. Measure blood pressure (manually and
 electronically)
 4. Assist patient with deep breathing
 5Collect sputum specimen
6. 3. Apply anti embolism stockings
7. Assist with automatic antithrombolytic
 <u>4. Apply sequential compression stockings</u>
8. 5. Apply ace bandages
9. 6. Assist the nurse with the application
of oxygen (see section F-8, 2-5) mask or
<u>cannula</u>
10. Pulse oximetry (see section F-7. Use
<u>pulse oximeter</u>
8 Demonstrate obstructed airway
techniques according to current
<u>guidelines</u>

I. Vital signs **Objectives** Content 1). Discuss the importance of measuring 1. Vital signs provide information about 17. Obtain training in cardiopulmonary 1. Provide cardiopulmonary resuscitation (CPR) training resuscitation. vital signs (v/s). the essential body processes 2. List three factors that affect vital signs 3. List the normal range for vital signs A. Adult B. Pediatric C. Infant D. Geriatric 4. Identify measures to prevent the spread of infection when taking vital signs 5. Explain the reporting and recording procedures 2. Identify the five vital signs. 1. Temperature, pulse, respiration, blood pressure and pain 3. Measure body temperature. 1. Define body temperature 2. Location of areas to measure temp A. Oral B. Rectal C. Axillary D. Tympanic E. Other 3. Types of thermometers 4. Measure pulse. 1. Define pulse and factors affecting 2. Locations of areas to measure pulse A. Radial B. Brachial C. Apical D. Pedal E. Carotid F. Femoral 1. determine rate 2. determine rhythm 5. Measure respirations. 1. Define respirations 2. Determine depth, rate, pattern and effort

6. Measure blood pressure (manually and	1. Define blood pressure
electronically).	2. Determine correct equipment
	3. Determine correct cuff size
	4. Use one step method
	5. Use two step method-palpate radial
	pulse
	6. Document and report results to nurs
7. Demonstrate use of oximeter.	1. Apply to correct location
	2. Measure pulse and oxygen level
	3. Report findings to nurse
8. Obtain data on patient's pain.	1. Collect data on pain using facility
	approved pain scale
9. Report and document vital signs	1. Report vital signs to nurse and
	document according to facility pol-

J. Care of the Patient's Endocrine System

Objectives	Content
Name and locate, on a diagram, the structures of the endocrine system.	1.—_Adrenals2.—_Testes3.—_Thyroid-Parathyroid4.—_Ovaries55. Pancreas6Pituitary _7Thymus
2. Describe the functions of the endocrine system.	1Ductless glands (release secretions intothe blood stream or tissue fluid toregulate body activities)2Hormones (secretions that regulatecertain body functions)3Specific hormonesAAdrenalin (produced by adrenalglands)BInsulin (produced by pancreas)CThyroxine (produced by thyroid)
3. Define the common medical terms/elements related to the endocrine system.	_1.—Adren-adrenal _2.—Endo-endocrine _3.—_Hormon-hormone _4.—_Gonad-gonad _5.—_Estr-estrogen
4. Describe the common diseases/disorders of the endocrine system.	_1.—Diabetes Mellitus _2.—Hyperthyroidism _3.—Hypothyroidism _4.—Cushing's Disease
5. Describe the observations to be reported by the CNA to the nurse.	1. Identify observations the signs and symptoms related to Diabetes

5. Describe the observations to be reported	<u></u>
by the CNA to the nurse. (continued)3.	Identify observations the signs and
	symptoms related to adrenal glands to
	adrenal glands by the CNA to the nurse.
	A. Addison's Disease
6. Demonstrate procedures related to the	1.—Collect a fresh fractional urine specimen
endocrine system.	— 2. Perform urine testing
	3. Performs Endocrine system.
	2. Perform finger stick for blood sugar
	monitoring
I	3. Reports results to RN/document

K. Care of the Patient with Patient's Urinary System Disorders

Objectives Content 1. Name and locate, on a diagram, the organs 1. Urethra of the urinary system. 2. Urinary bladder 3. Ureters 4. Kidneys 2. Describe the function of the urinary system. 1. Produces urine 2. Eliminates urine 3. Maintains electrolyte, water, and acid-base balance 3. Define common medical terms/elements 1. Nephr(o)-nephrology 2. Uria-urine related to the urinary system. 3. Py-pyuria 4. Ren-renal 5. Cyst-cystitis 6. Pyel(o)-pyelogram 7. Oliguria 8. Anuria 4. Describe the common diseases/disorders 1. Kidney failure 2. Nephritis of the urinary system. 3. Cystitis 4. Kidney stones (calculi) 5. Neurogenic bladder 6. Urethritis 7. Incontinence 5. List the observations to be reported by 1. Frequency the CNA to the nurse. 2. Urgency 3. Nocturia 4. Edema of feet, ankles, face, hand, fingers 5. Weight gain 6. Edema of the abdomen 7. Anuria 8. Thirst 9. Dry looking, non elastic skin tone 10. Parched or cracked lips and tongue 11. Dysuria

6. Describe the care of the incontinent patient.	1. Importance of hygiene
	2. Skin care
	3. Use of incontinent supplies
	4. Environmental concerns
	5. Assisting with bladder retraining
7. Demonstrate procedures related to the	-1. Measure urinary intake and output
urinary system.	-2. Empty the urinary drainage bag
	-3. Offer and remove the bedpan or urinal
	-4. Provide catheter care
	5. Collect a routine urine specimen
	6. Empty a leg bag
	7. Measure specific gravity
	8.—A. Care and handle urinary tubes
	properly
	-5. Collect a routine urine specimen
	6. Empty a leg bag
	7. Monitor urine using a reagent strip
	8. Provide care to an established urostomy
	A. Care for tubes and tubing
	B. Provide care around established
	<u>stoma</u>
	9. Strain urine
	10. Apply condom catheter
7. Demonstrate procedures related to the	11. Urinary testing with reagent strips
	12. 24 hr. urine specimen
	13Collect a clean catch urine specimen
J.	14. Apply an adult incontinent brief

L. Care of the Patient with Patient's Nervous and Sensory System Disorders

Ohi	ectives
Ou	CCHVCS

Content

- 1. List the divisions of the nervous system and their components.
- 1. Central nervous system (CNS), brain, and spinal cord functions
- 2-._Peripheral nervous system (PNS) nerve structures outside of the brain and spinal cord
- 3. Autonomic nervous system (ANS) nerves controlling organs, walls of blood vessels, and other involuntary muscles
- 2. Describe the function of the nervous system.
- 1. Transmits information very rapidly through means of nerve impulses conducted from one neuron to another

3. Define reflex and stimulus.

- 1. Reflex (an involuntary response to a stimulus)
- 2. Stimulus (an agent that causes a change in the activity of a structure)

4. List five major sense organs.

- 1. Visual (sight)
- 2. Auditory (sound)
- 3. Olfactory (smell)
- 4. Gustatory (taste)
- 5. Tactile (pressure, heat, cold, pain)
- 5. Describe the effect of environmental factors on the patient.
- 1. External factors
 - A. Taste
 - B. Smell
 - C. Touch-tactile changes
 - D. Pain
 - E. Sound
- 2. Internal factors
 - A. Hunger
 - B. Thirst
- 6. Define common medical terms/elements related to the nervous and sensory systems.
- 1. Cephal-encephalitis
- 2. Neuro-neuropathy
- 3. Cerebr-cerebral
- 4. Ot-otitis
- 5. Mening-meninges
- 6. Myel-myelin

7.	Describe the common diseases/disorders	1. Multiple Sclerosis
	of the nervous and sensory systems.	2. Parkinson's Disease
		3. Cerebral Palsy
		4. Increased intra cranial pressure
		— of the nervous and sensory systems.
		A. Brain tumor
		B. Brain injury
		C. Cerebrovascular accident (CVA)/-
		_ stroke
		5. Seizure disorder
		6. Spinal cord injury
		7. Meningitis
		8. Herpes Zoster (Shingles)
		9. Alzheimer's Disease and related
		dementias
		10. Amyotrophic Lateral Sclerosis (ALS)
		, , , , , , , , , , , , , , , , , , ,
8.	List observations to be reported by the	-1. Tremor (shaking)
	CNA to the nurse.	-2. Difficult swallowing
		-3. Difficult ambulation
		-4. Lack of facial expression/facial drooping
		-5. Complaints of double vision, blurriness,
		and/or loss of color vision
		-6. Difficult speech
		-7. Numbness, tingling, and/or burning
		-8. Inability to move a specific part of the
I		body/weakness in specific limbs
		-9. Complaints of changes in sexual
		Function
		10.—Loss of memory
-		11.— Loss or decrease in orientation
-		— (awareness of person, place, time)
		12.—_Decrease in general information
	-	13.— Lack of judgment
Q	List observations to be reported by the	13.—_Lack of judgment 14Withdrawal from contact with others
0.	——————————————————————————————————————	15. Changes in mood
	<u>CIVA to the harsel continued).</u>	16. Complaints of lack of hearing
		17Inappropriate responses
		17mappropriate responses
9	Describe the care of the seizure patient.	1. Observe basic neurological changes
٠.	2 331100 tile out of the bellete patient.	2. Seizure precautions
		3. Provide for patient safety during seizure
		2. I TO THE TOT PRINCIPLE DUTCE, GUILING BOILDING

10. Demonstrate procedures related to the	1. Care for the artificial eye
nervous and sensory system.	2. Care of a hearing aid
	3. Care for eye glasses/contact lenses
	4. ADLActivities of Daily Living (ADLs)
K.	5. Assist patient with sensory orientation
	A. Smell, taste, vision, touch, and
	hearing
	B Orient to time place and person

M. Care of the Patient with Patient's Reproductive System Disorders

Objectives Content

1. Describe and locate, on a diagram, the	1. Female
structures of the male and female	A. Ovaries
reproductive systems.	B. Fallopian tubes
	C. Uterus
	D. Cervix
	E. Vagina
	F. Clitoris
	G. Bartholin's gland
	H. Labia
	I. Breasts
	2. Male
	A. Testis
	B. Scrotum
	C. Epididymis
	D. Vas deferens
	E. Seminal vessel
	F. Ejaculatory duct
	—G. Prostate
1. Describe and locate, on a diagram, the	H. Cowper's gland
structures of the male and female	I. Glans penis
reproductive systems (continued)	J. Prepuce
	—K. Urethral meatus
	L. Urethra
	—M. Bladder
2. Describe the functions of the male and female	1. Male
reproductive systems.	A Reproduction
	B.Achieving sexual pleasure and release
	B. Male sex cell-sperm
	2. Female
	A. Reproduction
	B. Achieving sexual pleasure and
	release
	— C. Menstruation
	C. Ovulation
	D. Ovulation
	E. Menopause
	Z. Menopuuse
3. Define common medical terms/elements to	1. Hyster-hysterectomy
related the reproductive system.	2. Mast-mastectomy
Totalea the reproductive by Stein.	3. Testi-testes
	4. Arche-menarche
	5 Orchi-orchiectomy

4.	Describe common diseases/disorders of the reproductive system.	1. Sexually transmitted diseases (STDs) A. Syphilis B. Gonorrhea C. Pelvic Inflammatory Disease (PID) D. HIV/AIDS E. Chlamydia F. Genital Herpes G. Veneral Warts 2. Prostatitis 3. Impotence 4. Benign Prostatic Hypertrophy (BPH) 5. Male carcinomas 6. Endometriosis 7. Female carcinomas 8. Prolapsed uterus 9. Vaginal infections 10.—Rectoceles/cystoceles
5.	List observations to be reported by the CNA to the nurse.	11.—Toxic Shock 1. Male A. Painful or burning urination B. Decreased force of urinary stream C. Frequency and urgency of urination D. Nocturia E. Hematuria F. Urethral discharge G. Rashes
5.	List observations to be reported by the	 Z. Female A. Foul smelling vaginal discharge B. Itching, burning, swelling, and soreness C. Complaint of pelvic pain D. Vaginal bleeding between periods E. Excessively heavy menstrual flow F. Discharge/lumps in breast or axilla —G. Rashes
6.	Demonstrate procedures related to the reproductive system.	_1. Administer perineal care/apply peri pad 2.—Administer a non medicated douche 3.—_Administer a sitz bath A. Post partum/anal surgery/hemorrhoid

Unit XI

Care of Patients in Special Settings (Sections A-E)

At the Upon completion of this unit the student will be able to:

- 1. Care for the patient with unique needs Care for the patient's mental well being.
- 2. Care for the pediatric patient.
- 3. Care for the preoperative and postoperative patient.
- 4. Care for the geriatric patient.
- 5. Care for the patient in the home setting.

A. Care of the Patient with Unique Needs-Mental Health

At the completion of this unit the student will be able to:

_1. Define mental illness, related treatment, and care.
—2 Recognize signs and symptoms of mental illness.
3. Identify presenting behaviors associated with mental illnesses.
4. Describe the warning signs and impact of alcohol/substance abuse.
5. Describe the polypharmacy effects in older adults.
6. Identify the signs and symptoms of depression.
7. Recognize the risk factors in elder suicide.
8. Define common congenital disorders and discuss care of the patient with congenital disorders.
3. 9. Define developmental disabilities, related treatment, and care.
— 410Discuss the use of restraints for patients with unique needs.

Objectives Content

Define mental illness, related treatment, and care.—	 Factors that contribute to mental health Factors that influence mental illness Common mental illnesses Schizophrenia Personality disorders Manic Depression Depression _suicide prevention Bipolar disorder Post Traumatic Stress Disorder
Recognize signs and symptoms of mental illness.	 Signs and symptoms A. Case studies Contributing factors Assessment
3. Identify presenting behaviors associated with associated with mental illness	Prevention of common behaviors A. Schizophrenia B. Later in life paranoia C. Inappropriate sexual behaviors
4. Describe the warning signs and impact of alcohol/substance abuse.	 Prevalence Risk factors
5. Describe the polypharmacy effects in older adults.	 Nicotine Polypharmacy
6. Identify the signs and symptoms of depression.	 Causes Signs and symptoms Late-life depression Prevention Resources
7. Recognize the risk factors in elder suicide.	 The problem Risk factors Warning signs Intervention Resources

- 8. Define common congenital disorders and discuss care of the patient with congenital disorders.
- 3.9. Define developmental disabilities, related treatment, and care.

- 3.9. Define developmental disabilities, related treatment, and care. (continued)
- 4<u>10</u>. Discuss the use of restraints for <u>patients</u> <u>patient's</u> with unique needs.

- 1.—Inherited disorders
- 2.—Visual, auditory, and speech deficits
- 3.—Care of the patient with congenital
- —disorders in various settings
- 1.—Diagnosis made during the related—developmental period (birth to 21 years)
- 2.—Conditions that may be the result of ___impaired development
- 3.—Formal testing may be necessary to ____determine the degree of disability
- 4.—Treatment focuses on achieving —optimum level of function
- 5. Care of individuals with developmental disabilities in a variety of settings
- 1. See Unit VII Objective 6(5.) and relate it to patients patient's with unique needs

B. Care of the Pediatric Patient

At the <u>Upon</u> completion of this section the student will be able to:

- 1. Describe the unique characteristics of a pediatric setting.
- 2. Identify the special considerations one must take in working with the pediatric patient.
- 3. Discuss the most common medical/surgical problems found in a pediatric setting.
- 4. List observations to be reported by the CNA to the nurse.
- 5. Identify care for the newborn/infant and post partum patient

_Objectives		Content
Describe the unique characteristics of <u>in</u> a pediatric setting.	1.	Variety of ages A. Examples of groups
	•	B. Significance
	2.	Equipment differences, beds, blood
	3	pressure cuffs, and scales Playroom and activity program
		Rooming in
2. Identify the special considerations one	1.	Safety requirements as per age
must take in working with pediatric	2.	Communication needs as per age
patients.	3.	Emotional needs (importance of family
		and comfort objects)
2. Identify the special considerations on		Physical differences
	IC	A. Importance of temperature
control in		infants podiatrio patients
		<u>infants pediatric patients</u> B. Ranges of pulse, respiration, and
		blood pressure
		-C. Temperature
3. Discuss the most common medical/surgical	1.	Congenital defects
problems found in a pediatric setting.	2.	Accidents
	3	-Tumors
	4.	Long-term or chronic conditions
	5.	_Infectious diseases
	6.	_Emotional disturbances
		_Psychosocial problems
		_Nutritional disorders
	9.	_Respiratory problems A. Asthma
		_A. Asuma
4. List observations to be reported by the—	- 1	Appearance and physical condition
CNA to the nurse.		Body function
		_A. Vital signs
		_B. Weights
	_	_C. Intake/output
		— Movement and behavior
	-4.	Family interaction and/or requests

5. Identify the special considerations one	1. Safety requirements for the infant
must take in working with infants and post	2. Communication needs with mothers
partum patients.	3. Emotional needs (importance of family
	and comfort objects)
	4. Physical differences
	A. Importance of temperature control in
	<u>infants</u>
	B. Ranges of pulse, respiration, & B/P
	C. Temperature

C. Care of the Preoperative and Postoperative Patient

At the end Upon completion of this section the student will be able to:

- 1. Define the role of the CNA in caring for the preoperative and postoperative patient.
- 2. Describe the common fears and concerns of surgical patients.
- 3. Explain how patients are prepared for surgery.
- 4. Describe how to prepare for the immediate postoperative patient.
- 6. 5. Identify the signs and symptoms that must be reported to the nurse during the postoperative period.
- 67. Explain the importance of preventing surgical complications.

Objectives Content 1. Define the role of the CNA in caring 1. Role of the physician, nurse, and the for the preoperative and postoperative and CNA in the care of thepatient. preoperative and postoperative patient 2. Describe the common fears and concerns of 1. Address psychosocial aspects of surgical patients. preoperative care A. Common fears and concerns of the preoperative patient B. Role of the nurse and role of the CNA in dealing with these fears and concerns 3. Explain how patients are prepared for surgery. 1. Preoperative preparation of the patient includes: A. Patient education B. Special tests C. Nutritional restrictions D. Enemas E. Personal care F. Skin preparation G. Consent forms H. Preoperative medications I. Preoperative check list 3. Explain how patients are prepared for surgery 2. Role of the physician, nurse, and CNA (continued). preoperative activities_ 3. Role of the CNA in preparation of the ___ same day surgery patient

3. safety precautions a. transference of). transfer pati from stretcher to bed b). comfort and safety conce	rns
from stretcher to bed	rns
oj. Comfort and safety conce	
for the patient	
2.—_Patient controlled analgesia (PCA)
a). patient controlled under licens	
professional nurse supervision	1_
3. Tubes Care of tubing	
4. Drainage	
5. Identify the signs and symptoms that must 1. Changes in vital signs	
be reported to the nurse during the 2. Respiratory problems	
postoperative period. 3. Restlessness	
4. Skin and temperature changes	
5. Increased drainage or bleeding	
6. Vomiting	
7. Time and description of first voiding	5
8. Complaints of pain	
6. Explain the importance of preventing 1. Importance of positioning a patient	
surgical complications. Importance of preventing a patient postoperatively	
A. Comfort	
B. Prevention of complications	
C. Assist the nurse with Continuous	3
Passive Motion (CPM)	
D. Assist the nurse with automated	
venous compression devices	. •
6. Explain the importance of preventing 2. Importance of "cough and deep brea	the-
A. Pneumonia B. Atelectesis	
C. Role of the nurse and CNA	
D. Assist with the use of the incenti	ve
spirometer	, 0

D. Care of the Geriatric Patient

At the completion of this section the student will be able to:

1. Describe aging and related aging issues.	
Describe Recognize that many common beliefs about the aging process are based on misconceptions and myths and gain knowledge about current aging facts.	
2. Explain positive aspects of aging.	
3.—Identify physical disordersDescribe aging, the aging process, and related aging issu	<u>ies</u>
4. <u>Describe Alzheimer's Disease and dementia.</u>	
5. Describe the special issues related to Alzheimer's disease and dementia.	
6. Discuss responding to challenging behavior.	
7. Identify physical disorders related to the aging process.	
8_ Identify the psychosocial aspects of aging.	
5.9. Identify common medical and surgical problems in the geriatric patient.	
6. Describe types of living facilities for the elderly.	

Objectives

Content

1. Recognize that many common beliefs about	1. They cannot work
about the aging process are based on	2. They are all in nursing homes
misconceptions and myths and gain	
knowledge about current aging facts.	
2. Explain positive aspects of aging.	1. Healthy aging tips
	2. Resources
	1 5 1 1 1
3. Describe aging and related, the aging issues.pr	<u>Ocess</u> I.—Describe the aging person 2. Describe the role of the elderly in the
	home and community (including
	3. Describe the learning capacity of the
	elderly
	4. Describe the special skin problems of
the	elderly person
	orderly person
2. Describe the related aging process.	1. issues.
	2. Identify the major physical system
	— changes and related risk factors of the
	— aging process_
	2. changes and related risk factors of the
	aging process
	3. Identify the nutritional needs of the
	—aging patient
	—4.Discuss the emotional stresses that
	may be apparent during the aging process
	— <u>5.</u> Discuss sensory changes during the
	aging process
	6. Describe the role of the elderly in the
	home and community (including
-	cultural aspects)
	7. Describe the learning capacity of the elderly
	8. Describe the special skin problems of the
	elderly person
	<u>ciderry person</u>
4. Describe Alzheimer's Disease (AD)	1. Overview of the disease
and dementia.	2. Types
	3. <u>Who</u>
	4. Brain changes
	5. Diagnosing Alzheimer's
	6. Stages of Alzheimer's
	<u> </u>

5. Describe the special issues related to —	1. Discuss Alzheimer's Disease and
Alzheimer's Disease and Dementia.	Dementia All behavior has meaning
Alzheimer's Disease (AD) and other	A. Repetitive behaviors
	2. Identify the common characteristics of
	— 3.— related dementias.
	B. Wandering
	C. Aggression
	D. Hallucinations and paranoia
	E. Catastrophic reactions
	*
5. Describe the special issues related to	2. Discuss the physical and emotional
Alzheimer's Disease and other related	needs of the patient with Alzheimer's-
	Disease and Dementia
	4. Discuss appropriate intervention
	strategies when dealing with the
	confused and agitated person
	5. dementias (continued).
Disease and dementia	,
	3. Discuss stressors of Alzheimer's Disease
	and Dementiadementia on the family
	and how the CNA can assist in their
	support
6. Discuss responding to challenging behaviors.	1. Basic principles
	2. Cues and clues
	3. Identify triggers for potential problem
	behaviors
	4. Outline the plan
	5. Managing Alzheimer's Disease
7. Identify physical disorders related to the	1. Identify physical disorders common to
aging process.	agingIdentify causes of physical disorders
	3. Identify pertinent observations to be
	made and reported to the nurse by the
	CNA
	A. Changes due to drug treatment
4. Identify physical disorders relating to the	B. Changes in physical or mental
aging process. (continued)	condition
aging process. (continueu)	
	C. Changes in behavior due to pain

58. Identify the psychosocial aspects of aging.

- 1. Identify basic human needs, including physical, sociocultural, and psychological aspects
- 2. Describe the personality and attitude changes that may occur in aging
- 3. Identify losses that may occur in aging
- 4. Explain how the attitudes of society contribute to the psychological problems of aging
- 5. Describe ways that the elderly may be subject to abuse
- 6. Identify common myths related to sexuality in aging
- 9. Identify common medical and surgical problems in the geriatric patient.
- 1. Cancer
- 2. Heart disease
 A.–Congestive Heart Failure (CHF)
 B.–Angina
- 3. Diabetes
- 4. Multisystem diseases

E. Care of the Patient in the Home Setting

At the completion of this section the student will be able to:

- 1. Describe the role of the CNA as a member of the home care team.
- 2. List and discuss community resources that support patients at home.
- 3. Discuss special considerations and adaptations necessary for caring for a patient at home.

<u> </u>	4.—_	_Discuss	the impac	et of home	care on	the family	<i>r</i>

Objectives

Content

1.—Describe the role of the CNA as a member_	_ 1	——_Discuss Chapter 5: Regulations
—of the home care team.		Relating to Training Programs and
		Delegation by Registered Professional
		Nurses of Selected Nursing Tasks to
		Certified Nursing Assistants
		A. Delegation by R.N.a registered
		professional nurse
		B. Supervision by R.N.a registered
		Professional nurse
· -	2.	List home health team members and
		discuss their role in the team.
		A. RN
		B. LPN
		C. Physical therapist
		D. Occupational therapist
		E. Speech therapist
		F. HHA
		G. PSS
		H. Case manager
		I. Volunteer
		J. Social workers
1. Describe the role of the CNA as a member		-Discuss activities provided by <u>a HHA</u>
of the home care team (continued).		A.—_Personal care
		B.—_Light housekeeping
		C.—_Meal preparation
2. Discuss special considerations and adaptations	1.	Safety in the home care setting
necessary when caring for a patient at home.		A. Infection control
		B. Personal safety
		C. Adaptable equipment
		D. Food, kitchen safety, and storage
		E. Tub transfers
		F. Stairs
		G. Use of standard beds
	_	H. Ergonomics/body mechanics
	2.	Reemphasize the CNA's role in the
	_	administration of oxygen
1	3.	Assisting the patient with self
		administration of medications—

- 3. Discuss the impact of home care on the family.
- 1. Discuss traditional and nontraditional families
- 2. Describe functional and nonfunctional family behavior
- 3. Identify the reaction of family members to stress
- 4. Discuss stress reactions in the caregiver and ways to provide support
- 5. Discuss the impact of cultural values on care giving
- 6. Discuss death of a terminal patient at home

APPENDIX A

Examples of General Patient Observations

1. Ability to respond

- a. Is the patient easy or difficult to arouse to voice?
- b. Is the patient able to give his/her name, the time, and the location when asked?
- c. Can the patient identify others accurately?
- d. Can the patient answer questions appropriately?
- e. Can the patient speak clearly?
- f. Are instructions followed appropriately?
- g. Is the patient calm, restless, excited?
- h. Is the patient conversing, quiet, or talking excessively?

2. Pain or Discomfort

- a. Where is the pain located? Ask the patient to point to the pain.
- b. Does the pan radiate anywhere else?
- c. What is the duration of the pain?
- d. What is the patient's description of the pain?

i. <u>sharp</u> v. <u>burning</u> ii. <u>severe</u> vi. <u>aching</u>

iii. <u>knifelike</u>
iv. <u>dull</u>
vii._comes and goes
viii. <u>depends</u> on position

- e. Is the patient able to sleep and rest, move around, and eat?
- f. What is the position of comfort?
- g. Determine the level of pain using the facility appropriate chart

3. Respirations

- a. Do both sides of the chest rise and fall with respirations?
- b. Is there noisy breathing?
- c. Is there difficult breathing?
- d. What is the amount and color of the patient's sputum?
- e. What is the frequency of the patient's cough?
- f. Can the patient speak?

4. Skin

- a. Is the skin pale or flushed?
- b. Is the skin cool, warm, or hot?
- c. Is the skin moist or dry?
- d.—What color are the lips and nails?
- e. Are there sores or reddened areas?

5. Bowel and Bladder

- a. Is the abdomen soft or hard?
- b. Does the patient complain of gas?
- c. What is the amount, color and consistency of the patient's bowel movement?
- d. What is the frequency of bowel movements?
- e. Does the patient have pain or difficulty urinating?
- f. What is the amount of urine?
- g. What is the frequency of urination?
- h. What is the color and consistency of the urine?

6. Movement

- a. Can the patient move his/her legs?
- b. Are movements shaky/jerky?

7. Appetite

- a. What is the type of diet?
- b. Does the patient like the diet?
- c. What are the food preferences?
- d. How much food is consumed?
- e. How much fluid is consumed?
- f. What does the patient prefer for liquids?
- g. Is the patient experiencing nausea/vomiting?
- h. What is the amount, color, consistency of vomitus?
- i. Is the patient belching?

8. Eyes, Ears, Nose, and Mouth

- a. Is there eye drainage? What is the color and amount?
- b. Are the eyelids closed?
- c. Are eyes reddened?
- d. Does the patient complain of spots, flashes, or blurring?
- e. Is the patient sensitive to bright lights?
- f. Is there drainage from the ears? What color and amount?
- g. Can the patient hear? Does he/she need things repeated? Does he/she answer appropriately?
- h. Is there drainage from the nose? What color and amount?
- i. Is there breath odor?
- j. Does the patient complain of a bad taste in the mouth?
- k. Is the patient able to feed self?
- 1. Is the patient able to ambulate by self?
- m. What amount of assistance is needed?

9. Activities of Daily Living

- a. Is the patient able to perform personal care without help?
 - i. bathing
 - ii. brushing teeth
 - iii. combing and brushing hair
 - iv. shaving
- b. Does the patient use the toilet, commode, bedpan, or urinal?
- c. Is the patient able to feed self?
- d. Is the patient able to ambulate by self?
- e. What amount of assistance is needed?

10. Observations Related to Psychological Status

- a. Is the patient anxious?
- b. Is the patient confused?
- c. Is the patient withdrawn/sad/teary?

{Skill Sheets have been changed to include curriculum changes – an Excel version will be made available}

Student Name	<u>e:</u>			
NURSING ASSISTANT TASKS	Revised			
<u>CHECKLIST</u>	2008	_	_	
	Demo Date	Student Return Demo Date Lab	Student Return Demo Date Clinical	Instructor's Initials and Signature
Handwashing	-	_	_	_
Personal Protective Equipment	-	_	-	_
· gowning	-	_	_	_
· gloving	_	_	_	_
· mask technique	_	_	_	_
· goggles/caps/booties	_	_	_	_
· double bagging	_	_	_	_
<u>Protective Devices</u>	_	_	_	_
• adaptive devices	_	_	_	_
• extremities	-	-	-	_
• belt	_	_	_	_
• side rails	_	_	_	_
• protective cushions	-	_	_	_
• enablers/merry walker/trapeze	_	_	_	_
· electronic devices	_	_	_	_
· bed/lock wheels	_	_	_	_
· documentation	-	_	_	-
Ergonomics for C N A	_	_	_	_
Oxygen/Shut off Valve	_	_	-	_
Fire Safety	_	_	_	_
· Fire Extinguisher P.A.S.S.	-	_	_	_
· Fire Plan R.A.C.E	-	_	_	_
· Disaster Plans	_	_	_	_
Use Material Safety Data Sheet	-	_	_	_
Bed Making	_	_	-	_
· closed	-	_	_	-
<u>· open</u>	-	_	_	_
Bed Making/occupied	-	_	_	_
Admission Procedure	-	_	_	-
Transfer to Patient to Room	_	_	_	_

	Demo Date	Student Return Demo Date Lab	Student Return Demo Date Clinical	Instructor's Initials and Signature
Discharge Procedure				
Postmortem Care				
• per facility policy		_	_	_
· remove tubes from body	_	_	_	_
<u>· cultural sensitivity</u>	_	_	_	_
· medical and legal parameters	_	_	_	_
Bath	_	_	_	_
· complete bed bath	-	_	-	_
<u>partial bed bath</u>	-	_	-	_
· am and pm care	_	_	_	_
<u>· shower</u>	-	_	-	_
<u>whirlpool/tub bath</u>				
Personal Grooming	_	_	_	_
· shaving/electric/safety razor	_	_	_	_
· fingernail care	_	_	_	_
·· cleaning	_	_	_	_
·· cutting	_	_	_	_
· foot care	_	_	_	_
·· soaks	-	_	-	_
··· lotions	_	_	_	_
·· toenail clipping	_	_	_	_
· hair care/combing and care	_	_	_	_
· shampoo/bed/tub/ shower	_	_	_	_
· appearance	_	_	_	_
·· dress appropriately for the client				
Use Preventive Measures to Maintain Good Skin Care	_	_	_	_
· back care	-	-	_	_
· apply topical creams, lotions, ointments	_	_	-	-
·· prescription	_	_	-	_
·· non-prescription	_	_	_	_
· apply simple dressing	_	_	-	-
·· sterile/bandaid + 4X4 gauze	_		-	-
<u>··· non-sterile</u>	-	-	-	-
·· perform simple wound care	_	_	_	_

Protective Devices	<u>Demo</u>	Student Return DemoDate Lab	Student Return Demo Date Clinical	Instructor' s Initials and Signature
· apply heel & elbow protectors	_	_	_	_
· use special mattress/beds	_	_	_	_
· apply other positioning devices		-	-	-
Positioning/Body Mechanics				
· moving patient in bed	_	_	_	_
<u>· turning helpless patient</u>	_	_	_	_
· log rolling	_	-	-	-
· range of motion	_	_	_	_
active	_	_	_	_
passive	_	_	_	_
<u>Transfers/Transport</u>	_	_	_	_
· into/out of motor vehicle	_	_	_	_
· using a mechanical lift	_	_	_	_
· using a wheel chair	_	_	_	_
· using a geri-chair	_	_	_	_
· using a stretcher	_	_	_	_
· assist with use of the commode	_	_	_	_
· assist with a shower	_	_	_	_
• assist with transfer board/slide board	_	_	_	_
<u>· assist with ambulation</u>		_	_	_
· use a gait belt		_	_	_
· one assist		_	_	_
· two assist		_	_	_
Ambulate Using Assistive Devices		_	_	_
· crutches/cane				-
· walker	-	-	-	_
Patient Aids				
• apply hot/cold/warm/ moist/dry packs	-	-	-	-
• apply splint	-	-	_	-
· cast care			_	
· bed cradle/footboard	-	-	-	-
• apply	-	-	_	-
prosthesis/braces	-	-	-	-
• apply elastic bandage /sling	_	_	_	_

	<u>Demo</u>	Student Demo Date Lab	Student Demo Date Clinical	Instructor' s Initials and
Taking a Patient Temperature				<u>Signature</u>
<u>• oral</u>	_	-	1	_
<u>• rectal</u>	_	-	-	_
<u>• tympanic</u>	_	-	1	_
<u>• axillary</u>	_	-	•	_
• electronic		-		
Measure Pulse (manually and w/ doppler)	-	-		-
<u>· radial</u>	_	_	-	_
· brachial				
· apical	_	-	-	_
· pedal	_	-	-	_
· carotid	_	-	-	-
· femoral	_	-	1	-
· document/record # of beats	_	-	-	_
· report # and character of beats	_	-	-	-
Measure Respirations	_	-	1	-
· document/record # & character of respirations	_	-	1	-
Measure Blood Pressure using AHA Guidelines	_	-	1	-
• determine correct cuff size	_	-	-	_
<u>· manually</u>	_	-	-	-
<u>· electronically</u>	_	-	-	-
• determine orthostatic blood pressure	_	-	-	-
· report blood pressure to nurse	_	-	-	-
Obtain Patient Height and Weight	-	-	-	-
Collect Data on Pain	-	-	-	-
· report results to nurse	_	-	-	-
<u>Provide Mouth Care</u>		-		-
• natural teeth	_	-	-	-
<u>• dentures</u>	-	-	-	-
· special mouth care for an unconscious patient	_	-	-	-
Provide ADLs for a:	_	-	-	-
· patient with nasogastric tube	-	-	-	-
• patient with gavage tube	-	-	-	-
·· provide care to the external tubing devices	-	-		-
• provide care to a patient who is vomiting/turn head		_	-	_

_	<u>Demo</u>	Student Return Demo Date Lab	Student Return Demo Date Clinical	Instructor' s Initials and Signature
·· mouth care				
· provide care to a patient with an I.V.		_	_	_
··· care for IV tubing	-	_	_	_
· test for gastroccult	-	_	_	_
Administer Enemas	-	_	_	_
· soap suds enema (SSE)	_	_	_	_
· disposable	-			
Insert Suppository				
· non-medicated	_	_	_	_
· laxative suppository (long-standing bowel program)		_		
Provide Colo/Ileostomy Care (well-established stoma)	-			
Collect Stool Specimen	_	_	_	_
Record Stool Output	-	_	_	_
Test Stool (Hemoccult)	_	_	_	_
Intake and Output	_	_	_	_
· calculate % food consumed	_	_	_	_
· calculate fluids consumed	_	_	_	_
· document	_	_	_	_
Assist Patient with Established Bowel/Bladder Training	_	_	_	_
Program				
Patient Feeding	-	-	-	-
· set up tray/place	-	-	-	_
· prepare patient for meals	-	_	_	_
· serve meals	-	-	-	-
· independent feed	-	-	-	-
:feed a patient with dysphagia	ı	_	-	-
· dependent feed	-	_	_	_
<u>use of thickeners</u>	-	-	_	-
<u> · maintain hydration</u>	-	-	-	-
<u> pass supplement nourishments</u>	_	-	_	-
Measure Pulse/Oxygen Level with Pulse Oximeter	-	-	-	_
Oxygen	-	_	-	_
· plug & unplug for transport		_	_	_
· convert to/from portable tank/concentrator	-	_	_	_
· convert to/from back-up tank/concentrator	_	-	-	_

	<u>Demo</u>	Student Demo Date Lab	Student Demo Date Clinical	Instructor's Initials and Signature
- adjust O2 flow from established O2 therapy plan (RN supervised)				
• assist nurse with application of oxygen devices	_	_	-	_
Assist Patient with Incentive Spirometer Device	_	_	-	_
Assist with Application & Cleaning of Positive/Negative Pressure Assistive Devices	-	-	-	-
Assist Patient to Cough, Turn & Deep Breathe	_	_	-	_
Provide ADLs for a Patient with a Tracheostomy	_	_	_	_
Assist Patient with Application of Antiembolism Stockings/Devices	-			
Provide Relief for Patient's Obstructed Airway				
Perform Finger Stick Blood Sugar Procedure	_	-	•	-
Report/Document Results of Blood Sugar Reading	-	_	1	_
Measure Urinary Output	_	_	-	-
Empty/Record Urinary Drainage/Leg Bag	-	-	-	-
Offer/Remove Bedpan/Urinal	_	_	_	_
Provide Care to Established Urostomy	_	_	-	_
· care of tubing	_	_	_	_
· empty bag	_	_	_	_
Provide Catheter Care	_	_	-	_
· handle urinary tubes appropriately	_	_	-	_
Collects Urine Specimens	_	_	-	_
· collects 24 hour urine specimens	-	-	-	-
· collect clean catch urine	_	-	-	-
· collect routine urine	_	_	-	_
· strain urine for calculi	_	-	-	-
Apply Condom Catheter	_	-	-	-
Provide Incontinent Care	-	-	-	-
Apply Properly Sized Adult Incontinent Brief	_	-	-	_
Provide Care for Eye Glasses/Contacts/Artificial Eye	_	_	-	_
Provide Care for a Hearing Aid	_	_	-	_
Assist Patient with Sensory Orientation	-	-	-	-
	-	-	-	-
Complete CNA-specific tasks on the Pre-op Checklist	-	-	-	-
Assist Patient with Turning/Coughing/Deep Breathing Exercises	-	-	-	-
Provide for the Comfort and Safety of the Patient	_	_	_	_

	<u>Demo</u>	Student Return Demo Date Lab	Student Return Demo Clinical	Instructor's Initials and Signature
Empty Drainage Collection Devices with Nurse				
Supervision	_			
Care of the Mother/Infant	-	-	ı	_
• measure temperature, pulse, respiration and B/P of an infant	-	-	-	-
· care for the infant's umbilical cord	-	-	-	-
· care for the post partum patient				
Care of the Pediatric Patient				
<u>· measure temperature, pulse, respiration & B/P of a child</u>				
Care of Adolescent-Vital Signs	-			
Provide Skin Care and Put a Diaper on an Infant/Child	-	-	-	

The knowledge of all the skills have been demonstrated satisfactorily by the student.	<u>:</u>
Instructors Initials and Signature:	
School	

APPENDIX C

Examples of Abbreviations

CNM certified nurse-midwife prep prepare pt for surg C/O	Abbreviation	Meaning	Abbreviation	Meaning	
ABR absolute bed rest O2 oxygen abd abdomen NP nurse practitioner ac before meals NPO nothing by mouth ad lib if patient so desires OPD outpatient department O2 oxygen ADL activities of daily living OR operating room ODB outpatient department amb amount OT—occupational therapy at O2 ounce at D2 ounce bid twice a day Peds pediatries DPA physician assistant BM bowle movement, feces per by, through pc after meals BP blood pressure per by, through BR bedrest P.M. afternoon BR bedrest P.M. afternoon BRP bathroom privileges post after BRP bathroom privileges post after BRP bathroom privileges post after C — Centigrade, Celsius postoperative with postop postoperative with prn when ever necessary Prn whenever necessary Prn physical therapy CPR—cardiopulmonary resuscitation pheevery hour plice discontinue QHS—cvery night at bedtime Disch discharge qid four times per day desg Disch discharge q22h every 2 hour	aa	of each, equal parts	$_ml$	milliliter	
abd abdomen NP nurse practitioner ac before meals NPO nothing by mouth ad lib if patient so desires OPD outpatient department O2 oxygen ADL activities of daily living OR operating room— ODB out of bed A.Mmorning ortho outpatient department amb amount OT— occupational therapy at oz ounce at pe after meals bid twice a day-Peds pediatries P.A. physician assistant BM bodrest P.A. physician assistant BR bedrest P.M. afternoon— BRP bathroom privileges post after BRP bathroom privileges post propagative e with postop postoperative e with postop postoperative e with postop propagative e with propagative e cubic centimeter prep prepare pt for surgery CCU cardiac eare unit pt patient or pint CRR centified nursing assistant a cvery prepare pt for surgery CNAcertified nurse-midwife prep prepare pt for surgery CNAcertified nurse-midwife prep prepare pt for surgery PT physical therapy CPR— cardiopulmonary resuscitation pt postop post of the surgery CVA - Cerebrovascular accident—q3h qh every 3 hourshour despends a discharge q2h every 2 hour drived the surgery and postop post of the surgery and discharge q2h every 2 hour	abd	abdomen	NPO	nothing by mouth	
ac before meals of the patients of desires of the patients of desires of the patients of desires of the patients of the patient of patien	ABR	absolute bed rest			
ad lib if patient so desires OPD outpatient department O2 oxygen ADL activities of daily living OR operating room— OOB AMmorning ortho out of bed AMMmorning ortho outpatient department amb ambulation, walking OR operating room amt amount OT— occupational therapy @ at o2 ounce @ at pe after meals bid Invice a day Peds pediatries pA. physician assistant BM bowel movement, feees per by, through BR bedrest PM. afternoon— BR bedrest PM. afternoon— BR bedrest PM. afternoon— BRP bathroom privileges post after BRP bathroom privileges post after CCU centigrade, Celsius postoperative with postop postoperative e with prin when ever necessary CCU cardiac care unit pt patient or pint CRR complete bedrest PT physical therapy CNA certified nurse-midwife prep prepare pt for surgery CNA certified nurse-midwife prep prepare pt for surgery CVA Cerebrovascular accident—q3h qh every 3 hourshour de discharge qid four times per day drag Disch discharge q2h every 2 hour	<u>abd</u>	abdomen	NP	nurse practitioner	
O2 oxygen ADL activities of daily living OR operating room OOB out of bed A.M. -morning ortho orthopedies OPD outpatient department amb amount OT occupational therapy @ at oz ounce @ at pe after meals bid livice a day Peds pediatries P.A. physician assistant per by, through pc after meals BP bowel movement, feces per by, through pc after meals BP blood pressure per by, through pc after meals BR bedrest P.M. afternoon BR bedrest P.M. afternoon BRP bathroom privileges post by mouth C Centigrade, Celsius postop postoperative e with postop postoperative e with proport before surgery PCBC _complete blood count proport proport prive CBC _complete blood count proport prepare pt for surgery PCCU eardiac cere unit pt <	ac	before meals	<u>NPO</u>	nothing by mouth	
ADL OOB	ad lib	if patient so desires	OPD	outpatient department	<u> </u>
OOB out of bed A.M. -morning ortho orthopedies OPD outpatient department amb -ambulation, walking OR operating room amt oz ounce (a) at pe after meals bid physician assistant pediatries pediatries P.A. physician assistant pediatries pediatries P.A. physician assistant per by, through pc after meals BM bounderstream pediatries pediatries P.A. afternoon ps by, through pc after meals BR bedrest po by mouth BR bedrest po by mouth BRP	<i>O2</i>	oxygen			
A.M. onorning outpatient department amb ambulation, walking OR operating room outpatient department ambulation, walking OR operating room outpatient ambulation, walking OR operating room outpatient of the properties of the properties outpaties of the properties	ADL	activities of daily living	OR	operating room	_
OPD outpatient department amb —ambulation, walking OR operating room amt amount OT — occupational therapy @ at oz ounce @ at pc after meals bid _per after meals bid _physician assistant _per by, through pc after meals BM bowel movement, feces per by, through pc after meals BM bowel movement, feces per by, through pc after meals BM bowel movement, feces per by, through pc after meals BP blood pressure per by, through pc after meals BP blood pressure per by, through pc after meals BR bedrest P.M. after moon prount BR bedrest p.M. after C _centigrade, Celsius postop postoperative postoperative CBC _complete blood count <td>OOB</td> <td></td> <td>out of l</td> <td><u>bed</u></td> <td></td>	OOB		out of l	<u>bed</u>	
amb —ambulation, walking OR operating room amt amount OT——occupational therapy @ at oz ounce @ at pe after meals bid twice a day-Peds pediatries	A.M.	-morning	ortho		
amt amount OT—occupational therapy (a) at oz ounce (a) at pe after meals bid	OPD	out	patient department	<u> </u>	
amt amount OT—occupational therapy (a) at oz ounce (a) at pe after meals bid	amb	——ambulation, wa	ılking C	OR operating room	<u>. </u>
@ at pc after meals bid	amt			cupational therapy	
## at twice a day Peds pediatries physician assistant ## physician assistant ## provided a day Peds pediatries physician assistant ## provided assistant	(a)	at			
bid	_	at		after meals	
P.A. physician assistant BM bowel movement, feces per by, through pc after meals BP blood pressure per by, through BR bedrest P.M. afternoon BRP bathroom privileges post after BRP bathroom privileges post after BRP bathroom privileges post after BRP bathroom privileges post postoperative c with postop postoperative c with prin when ever necessary FORC ——complete blood count preop before surgery prin whenever necessary ce cubic centimeter prep prepare pt for surgery CCU cardiac care unit pt patient or pint CRR complete bedrest PT physical therapy CN.A. —certified nurse-midwife prep prepare pt for surgery CCN ——complaint of qd cvery day PT physical therapy CPR —cardiopulmonary resuscitation qh every hour pt patient or pint q2h every 2 hours q every dec discontinue QHS every alpha every 2 hour drsg Disch discharge q2h every 2 hour		— twice a d		pediatrics	
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CCentigrade, Celsius	BRP		1		
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C.N.Acertified nursing assistant_q	<u>CBR</u>	complete bedrest	1		
CNM certified nurse-midwife prep prepare pt for surg C/O		1	nt -g	1 / 1 /	before surgery
C/Ocomplaint of qdevery day			_		
PT physical therapyCPR—_cardiopulmonary resuscitation qh every hour pt patient or pint q2h every 2 hours q every CVA——Cerebrovascular accident—q3h qh every 3 hourshour de discontinue QHS every night at bedtime Disch discharge qid four times per day drsg—Disch discharge q2h every 2 hour		-	* *		
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<u>drsg</u> — <u>Disch</u> <u>discharge</u> <u>q2h</u> <u>every 2 hour</u>			~		
		9	1		everv 2 hour
	<u>Drsg</u>	dressing—qod	_		

<i>D.O.</i>	osteopathic doctor	qhs	every night at bedtime	
DOA	—dead on arrival———	— <u> </u>	four times per day	
Dr.	doctor	qs	—quantity sufficient	
<i>Dx.</i> —	diagnosis	$-$ _ qt	quart	
ECG/EKG	—_electrocardiogram——	- Rm	room	
ED	emergency department		—_range of motion	
R.N.	registered nurse		_ 0 0	_
EEG-	—electroencephalogram—	RRrecovery room	Rx	treatment
EENT	—eyes, ears, nose and throd	at -Rx	treatment	
ER	emergency room			
F	- Fahrenheit		sugar and acetone	
ft	foot	— SOB	shortness of breath	
F	Fahrenheit	spec	specimen	
	foot	SSE	soap suds enema	
gal	gallon	S	without	
GI —	gastrointestinal	ss one-half	<u>stat</u>	immediately
GU	genitourinary———	SSE Site haif	soap suds enema	immediately
gyn	gynecology	- stat	immediately	
H2O		—_STD_sexually transi	•	
hr	hour	—_SID sexually transf —GYN	gynecology	
hs	bedtime, hour of sleep	Surg	<u>surgery</u>	_
ht	height	TID	three times per day	
HCU ICU	intensive care unit	—H2O	water	
Surg		<u> </u>	water	<u> </u>
	<u>surgery</u>	TLC	tandan lanina agua	
hr	<u>hour</u>		tender loving care	
I&O	intake and output	<u>nt</u>	height	_
TPR	temperature, pulse &——			
<u>I&O</u>	intake and output		<u>respirations</u>	
IV	intravenous-		respirations	
<u>L</u>	liter		UA urinalysis	
lab	laboratory	<u>VDRL</u>	Venereal Disease	
lb			Research Lab (test for	
liq	liquid		venereal disease)	
L.P.N.	licensed practical nurse	VS	vital signs	
<i>M.D.</i>	medical doctor	— <u>L</u>	liter	<u> </u>
<u>v/s vital signs</u>				
<u>lab laboratory</u>		<i>WBC</i>	white blood count	
<u>lb</u>	pound	wt	weight	
	quid			
L.P.N.	licensed practical nurse	<u> </u>		
M.D.	medical doctor			

APPENDIX D

Examples of
Admission-Retention-Dismissal
Criteria
For
CNA Programs
Developed by:
MHOEA
(Maine Health Occupations Education Association)
July 21, 2004

	ntion, Dismissal Policies for secondary and adult alth Occupations instructors on June 25, 1991, and
as amended raugust 2000, and sury 2004.	Department of Education— University of Southern Maine MHOEA
I have read and understand the admission/retenor	-

EXAMPLE OF CERTIFIED NURSING ASSISTANT COURSE PHILOSOPHY

Nursing care is concerned with the basic needs of individuals who have physical, mental, social, and cultural dysfunction. The CNA with appropriate education and training is capable of giving nursing care under the supervision and delegation of the registered professional nurse in tasks which support nursing practice.

OBJECTIVES:

The objectives of this course are to provide a means of acquiring basic nursing techniques and skills designed to furnish the graduate with entry level skills in the health field. The experience gained as a CNA also enables the individual to consider and pursue upward mobility in the health services as opportunities arise.

At the	completion of this course, the student will be able to:
<u>a.</u>	Maintain a proper physical and emotional patient environment.
<u>b</u> .	Report and record observations.
<u> </u>	Provide assistance in personal hygiene.
<u>d</u> .	Assist with body movement and ambulation.
<u>e.</u>	Assist with nutrition and elimination.
f.	Assist with emergency situations.
<u>g.</u>	Assist the registered professional nurse in providing general patient care.
<u>h</u> .	Communicate in an effective and positive manner.

EXAMPLE OF ADMISSION CRITERIA

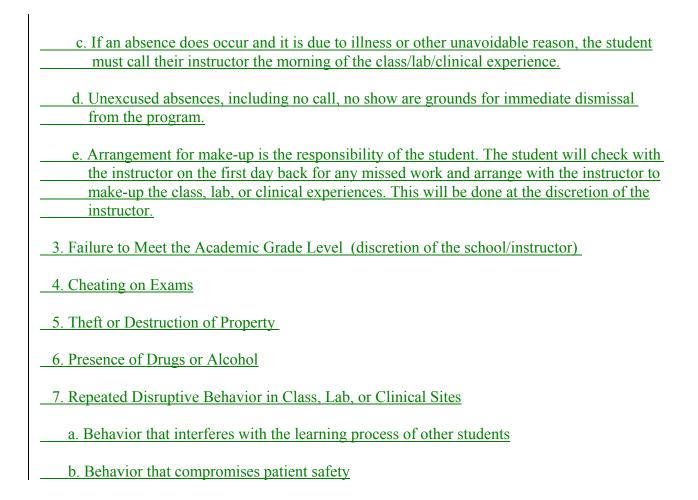
Important: You will be required to have a State Bureau of Identification (SBI) done prior to beginning the clinical experience of this program and this must be submitted to the Registry when you are being placed on the Certified Nursing Assistant Registry. The attached fact sheet on employment restrictions provides information about felony convictions that will bar you from employment as a Certified Nursing Assistant. Please read the fact sheet and sign the application form stating that you have read and understand the information regarding your ineligibility for employment if you have any convictions.

- 1. Minimum age 16
- 2. Good Physical and Mental Health
 - · good grooming and personal hygiene
 - · absence of drug and alcohol abuse
 - · dependable, reliable, work habits
- 3. High School Diploma or GED
 - 4. Ability to Read and Write English
 - · grade level of the 9.0 (preferred 12.9)
 - · entrance exam-TABE adult level student
- 5. Completed SBI Check
- 6. Immunization Measles, Mumps, and Rubella (MMR) unless born before 1956
 · all immunizations and testing required by cooperating clinical facility, including
 - Hepatitis B and evidence of negative T.B. test or negative chest x-ray
- 7. Physical Exam within the past year-letter from physician stating the candidate is physically capable of doing CNA work
- 8. Two Letters of Reference
- 9. Interview with Primary Instructor

EXAMPLE OF RETENTION CRITERIA

Successful completion of a CNA Course is dependent upon many factors. Participants who engage in any of the behaviors listed below may be dismissed from the program. The instructor will meet with the student and provide the appropriate documentation of warning, probation, or dismissal. The student and instructor will plan goals and the student will be given the appropriate amount of time to improve through meeting the goals.

1. Attitudes
a. Acts of verbal or physical aggression
b. Displaying negative attitudes with peers, instructor, or facility staff members
2. Absenteeism
a. Each educational program must have a policy relating to absenteeism and provision of make-up for the students.
b. Every student in the program is required to attend all 180 hours of program including 90 hours theory, 20 hours skills laboratory, and 70 hours clinical practice. (See Maine State Board of Nursing Curriculum)



BIBLIOGRAPHY

for

Certified Nursing Assistant Instructors

A COMPLETE BIBLIOGRAPHY IS AVAILABLE FROM THE CURRICULUM RESOURCE CENTER OF MAINE AT United Technologies Center WITH TEXTS AUDIO VISUALS and MODELS

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